



Royal Flying Doctor Service
SOUTH EASTERN SECTION

Year in Review 2022-2023

AN UNWAVERING COMMITMENT
TO OUR COMMUNITIES



Contents

Acknowledgement of Country

The Royal Flying Doctor Service (South Eastern Section) pay our respects to the traditional custodians of the lands we live and work on. We respect the knowledge of, and connection to, land, waters, and sky, Aboriginal people have. We pay respect to Elders past, present and emerging, as holders of knowledge and seek to work with Aboriginal peoples, families and communities on our journey of reconciliation.

Cover image:
William Bennett and sons
Opposite: Richard Wilson,
a Champion from the
We've Got Your Back program

So much has changed over the last 95 years as we have moved to meet the needs of outback Australians. But one thing that will never change is our commitment to always be there when we are needed.





Where we work

Across NSW and beyond, we deliver a range of health clinics and services, respond to medical emergencies and transfer patients with non-life-threatening conditions. The South Eastern Section collaborates in service delivery with RFDS sections across state borders, in particular with RFDS Queensland, Central Operations, Victoria and Tasmania.

● **Primary Health Clinic**

We provide early intervention, prevention, health information and screening, as well as chronic disease management services. We also provide visiting specialist clinics with medical consultants including ear, nose and throat specialists, dermatologists, eye specialists and a specialist breast care nurse (with the McGrath Foundation) who supports patients from diagnosis, and throughout treatment.

● **Remote Area Nurses on site**

Remote Area Nurses work from a fixed location 24/7, providing the community with reliable access to vital primary and emergency healthcare services.

● **GP Medical Practices**

Our GP practices provide non-emergency healthcare including immunisations and children's health checks, men's and women's health, chronic disease management, wound care, skin checks and minor surgical procedures.

● **Dental and Oral Health**

We deliver regular, vital dental and oral health services through our specialist dental van and fly-in fly-out (FIFO) clinics.

● **Mental Health and Alcohol and Other Drugs support services**

Our mental health team provides direct clinical services to people living in remote communities to improve their overall health and wellbeing.

● **Wellbeing Places**

Our Mental Health, Alcohol and Other Drugs team operate in these locations, providing a range of services from clinical treatment to educational workshops and programs to enhance wellbeing.

● **We've Got Your Back (WGYB) – Far West Region**

In partnership with Lifeline, we provide a mental health peer support program that engages people in the topic of mental health, provides advocacy for people impacted by drought and illness, and links people to services in their community

● **Guiding Rural Outback Wellbeing (GROW)**

The RFDS GROW (Guiding Rural & Outback Wellbeing) Program is a wellbeing engagement platform servicing schools and communities in rural and remote areas across Western NSW. The GROW Aquaponics Program supports schools with GROW Units that assist with STEM outcomes, sustainable food production, healthy lifestyle choices and early education and intervention for Mental Health, Alcohol and Other Drugs. The GROW Community Program provides wellbeing education, support pathways and facilitates events to bring health and wellbeing services to isolated communities.

● **Emergency retrieval service – provided to all regions within the state of NSW**

Our specialist doctors and flight nurses are on call 24/7 to provide emergency aeromedical retrievals (also called primary evacuations) for patients who are experiencing a medical emergency. These patients are provided with lifesaving medical care and are immediately transported, in our specially fitted-out medical aircraft and vehicles, to hospital for continued emergency treatment.

We also provide more than 400 medical chests with emergency pharmaceuticals and medical supplies in remote locations across the network.

● **Inter-hospital transfers including Air Ambulance locations**

This service is delivered from our bases in NSW. Transporting critically ill patients by air, to the specialist, lifesaving care they need, when they need it.

Our highly qualified medical teams are on call 24/7 to provide vital healthcare and transfer severely unwell (acute) patients, where there is a need for lifesaving, specialised care or equipment that is available at another hospital.

● **Non-Emergency Patient Transfers (NEPT)**

We transfer patients to and from the state capital's world-class hospitals or to their home to recover long-term.

● **Rural Aerial Health Service (RAHS)**

We improve access to healthcare for people in these communities by flying visiting doctors and medical specialists in and out on a regular, rostered basis.

● **Contracted Aeromedical Service Delivery**

We provide aircraft, pilots and engineers who work in partnership with healthcare personnel from Ambulance Tasmania, RFDS Tasmania, RFDS Victoria and the Ministry of Health.

Launceston – Our team of pilots and engineers based at Launceston are primarily responsible for delivering 24/7 aviation support to RFDS Tasmania and Ambulance Tasmania, who provide medical teams supporting communities across Tasmania and the Bass Strait Islands.

Essendon – From this facility, our team is contracted to support RFDS Victoria in the provision of weekly aeromedical NEPT services, including transportation of neonatal and paediatric patients.

● **South Eastern Section Bases**

We fly and drive out of our bases, delivering healthcare to people living in across rural, remote and regional NSW. Our bases in Dubbo and Broken Hill are also home to our state-of-the-art tourism Visitor Experience centres.

● **Support office**

Our Support Office provides a range of services that support the RFDS operations, such as Fundraising and IT.

Message from our CEO

When the Royal Flying Doctor Service was first established in 1928 there were around 2.5 million people living in NSW. Our organisation helped to provide a 'mantle of safety' that allowed our regions to thrive. Fast forward to today and our state population has swelled to 8 million, with around 2 million people calling regional, rural and remote Australia home.

I wish I could say that over time the demand for our services has lessened – but the exact opposite is true. Our core is still very much our emergency services and remote clinics. But we've now expanded to provide a whole suite of healthcare services that people living in cities take for granted. Dentistry, women's reproductive support, breast checks, mental health – we provide more than 54,000 occasions of care each year and are part of the fabric of healthcare service provision in outback NSW.

RFDS research from earlier this year found that almost 45,000 people in remote and very remote Australia had no access to any type of primary healthcare service within 60 minutes of where they live. Closer, to home, Western NSW Public Health Network released research in 2019 outlining the ongoing GP workforce shortages in the region. More than half of GPs practicing in small towns in Western NSW were 55 or over, and likely to retire in the next 10 – 15 years. This is a big challenge for our region.

Yet, the value of preventative healthcare services is proven again and again – with oral health linked to overall health, and access to mental health services leads to better quality of life and a reduction in instances of self-harm.

The regions cannot survive without access to critical primary health care. However, the cost of delivering those critical services continues to increase. Operational costs, the cost of medical supplies, the value of the Australian dollar, supply chain constraints, labour shortages and the ever-increasing cost of fuel (absolutely vital to keep our planes in the sky and our vehicles out and about) are shifting sands beneath all our feet.

Some healthcare providers have taken these external forces as a sign to scale back. However, we are taking this as a sign that we need to operate smarter and in greater concert with the broader healthcare sector to ensure we can continue to deliver on our promise.

For instance, as a non-profit, we go where we can provide the most support with the biggest impact. In addition to our GP Clinic at our Broken Hill Base, over the last 12 months we have taken on the operation of three GP clinics – in Warren, Gilgandra, and Condobolin. The decision to operate these clinics was not taken lightly, but we recognised the important opportunity to provide much needed certainty and stability for the communities that rely on these GP services.

As we quickly approach our 100-year anniversary, we will continue to be responsive to the needs of the communities we serve.



Greg Sam
CEO, Royal Flying Doctor Service
(South Eastern Section)



BOARD OF DIRECTORS



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(Chair)



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(Tony) MacRae



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Elaine (Ruth) Sandow

Message from our Chair

This year marked the 95th anniversary of the first flight of the Royal Flying Doctor Service that flew from Cloncurry to Julia Creek on May 17, 1928.

When the Reverend John Flynn saw his vision for an aeromedical service become a reality, he must have dared consider the role it would play 10, 50 or 100 years into the future. As we near that century of service, it's fair to say that even Reverend Flynn himself may not have realised the legacy he would leave.

Not only is the RFDS still conducting life-saving retrievals for people who are seriously ill or injured, we now do so much more.

The gap between the health standards of those in capital cities and those in regional areas is growing. People living in remote and very remote areas are overall 4.1 times more likely to die from heart, stroke and vascular disease, as those living in cities. The Flying Doctor has stepped in to focus on providing primary healthcare and address this disparity.

From our bases at Broken Hill and Dubbo our highly skilled doctors, nurses, dentists, mental health clinicians and other specialists fly or drive to remote communities to provide them a full suite of care. In many of these communities the RFDS is the only accessible provider of healthcare.

For some, we will provide their healthcare needs from birth right through until their elder years. They have great trust in us, and we will never take that for granted.

We shape our services around our patients and communities, they are the heart of all we do. Consulting with communities about their needs and doing our best to respond to what they tell us is a key approach of the RFDS.

By providing this essential support, we help to underpin the social and economic sustainability of large areas of Australia. An independent economic analysis has found that the RFDS contributes about \$100m annually to the economy of NSW, Victoria, Tasmania and the ACT.

Having safe and high-quality healthcare gives families the confidence to remain or relocate to regional and rural Australia. A trend we've seen post COVID, and continues to this day with families looking for a different way of life away from our urban centres. This confidence gives businesses the ability to recruit staff and run their operations; and allows communities to maintain the wider social fabric essential to a satisfying quality of life.

So much has changed over the last 95 years as we have moved to meet the needs of outback Australians but one thing that will never change is our commitment to always be there when they need us.



Dr Saranne Cooke
Chair, Royal Flying Doctor Service
(South Eastern Section)



Sanchia Treloar



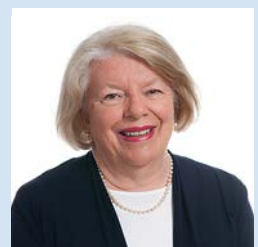
Andrew Monaghan



Amy Cooper



John Baird



Joan Treweeke OAM
(retired)



GOVERNMENT HOUSE
SYDNEY

Message from

**Her Excellency the Honourable Margaret Beazley AC KC
Governor of New South Wales
and Mr Dennis Wilson**

As joint Patrons, Dennis and I congratulate Royal Flying Doctor Service (South Eastern Section), on another year of delivering life-saving and life changing services across New South Wales.

We were delighted to be a part of last year's Year in Review event at the Base in Broken Hill and to read about the expanding range of services now available to people in rural and remote areas.

This year, 2023, marks the 95th anniversary of Royal Flying Doctor Service's first flight from Cloncurry to Julia Creek on 17 May 1928. Now, nearly a centenary later, RFDS has grown from a provider of emergency retrievals to an organisation which contributes a full suite of primary healthcare services including GP check-ups, dentistry, and mental health support – services that people living in urban centres tend to take for granted.

RFDS has provided clinics by road and by air to isolated communities who would otherwise need to travel hundreds of kilometres to access healthcare. In some cases, the RFDS may be the only provider of specialist services to a community. If RFDS doesn't go, there is no other alternative. In Gilgandra and Warren, they assumed ownership of two GP clinics, to ensure continuity of healthcare for patients in these towns when private GP clinics closed down.

Our sincere thanks go out to all of the staff and generous supporters of Royal Flying Doctor Service (South Eastern Section), for your magnificent support of communities in rural and remote New South Wales. You are a much-respected part of the fabric of rural and regional Australia. There is no doubt that wherever RFDS is, the community is better for it.

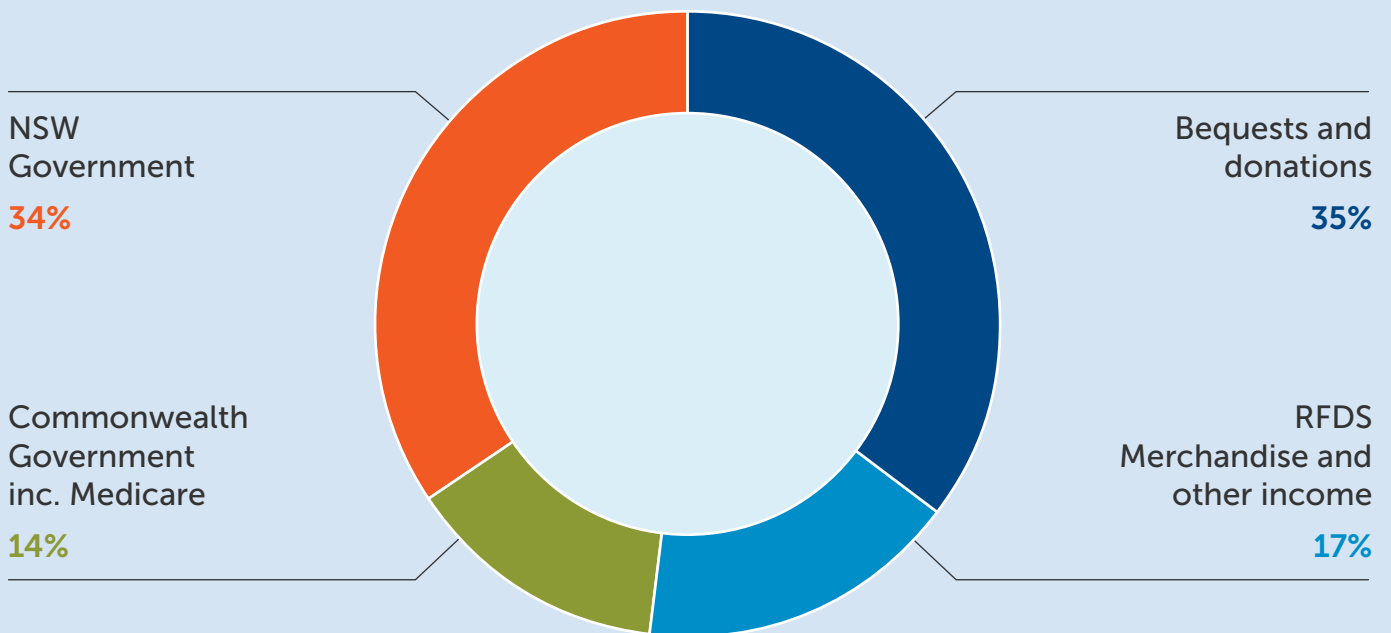
**Her Excellency the Honourable Margaret Beazley AC KC
Governor of New South Wales**

Mr Dennis Wilson

Government House, Macquarie Street, Sydney NSW 2000
telephone: 02 9228 4111 | website: www.governor.nsw.gov.au

Where our funding comes from

We remain grateful for the continued support and generosity of our funders and supporters who we rely upon every day.



2022-23 Snapshot of our year

Provided over

68,000

occasions of care

28,700

occasions of care provided at 3 GP clinics including Clive Bishop Medical Centre, Warren and Gilgandra



18,895

occasions of care delivered at over 2,169 primary care clinics



3,774

dental consultations at 666 clinics



3,787

face-to-face mental health consultations



1,776

mental health clinics with Mental health programs run across 30 locations



8,189

telehealth consultations



4,609

inter-hospital transfers of patients ranging from low to high-acuity



91

emergency retrievals



24/7

Our specialist doctors and flight nurses provide emergency aeromedical retrievals

Vaccination clinics have now been absorbed into traditional clinics and face to face consultations



400

medical chests with emergency pharmaceuticals and medical supplies

Employed

348 staff across Broken Hill, Cobar, Dubbo, Essendon, Launceston, Lightning Ridge and Sydney including

38 medical practitioners

17 dental health practitioners

53 registered nurses

42 pilots

12 ambulance transport attendants

25 engineers

28 mental health, alcohol and other drugs clinicians



Saved two GP clinics

from closing in Warren and Gilgandra, providing care to 8,400 patients

60,000

people were welcomed at our Visitor Experience centres in Broken Hill and Dubbo



15 aircraft have flown more than

3,000,000km



RFDS marks

95 years

of service



Named Australia's Most Reputable Charity by Charity RepTrak for the 11th time



Voted as Australia's Most Trusted Charity by Reader's Digest and the only not-for-profit recognised in the Top 10 Most Trusted Brands

NEPT Registered Nurse Jane Clarke
and Flight Nurse Jackson Dowling



Supporting communities

From retrieving the ill or injured, to caring for people throughout their life with primary care and allied health services, the RFDS are, quite literally, hope on the horizon, providing access to care and services where others can't or won't go.

“Improving access to healthcare for rural and remote communities – it drives everything we do,” Jenny Beach gets straight to the point. As GM of Health Services for RFDS South Eastern Section, she is acutely aware of the role access to healthcare plays in impacting health outcomes.

Well established data tells the story: almost two million people call regional, rural and remote NSW home. That's one in four people in NSW that live outside urban centres. Health of these people is far poorer than those who live in major cities and the more remote, the poorer the health outcomes. People living in these parts have lower life expectancy, higher rates of ill health, chronic disease and potentially preventable hospitalisations, and greater levels of mortality, morbidity and health and disease risk factors.

For Aboriginal and Torres Strait Islander peoples, life expectancy is at least 10 years less than other Australians. Aboriginal babies die at more than twice the rate of other Australian babies, and Aboriginal and Torres Strait Islander people experience higher rates of preventable illnesses such as heart disease, kidney disease and diabetes. Indigenous people are 1.8 times more likely to die from heart, stroke and vascular disease, than non-Indigenous Australians. The mortality rates for Aboriginal and Torres Strait Islander peoples is on par with some of the world's most impoverished nations.

One of the reasons behind these statistics is also well established: Access to healthcare. Compared to those living in cities, people in rural, regional and remote communities travel greater distances to access services, and also have poorer access to health care – from hospital to comprehensive primary healthcare services.

“This is why we do what we do,” Jenny continues. “We fundamentally believe that everyone should have the same access to primary healthcare, no matter where they live.”

And in what's been a challenging year – our new post-covid world, health workforce shortages, economic pressures (inflation and rising costs, decreasing funding), droughts, floods and bushfires, and shifting needs of rural, remote and First Nation communities (such as increased mental health need) – the RFDS SE Section has powered on, continuing its life saving and preventative healthcare services, while also evolving and diversifying to deliver on its promise.

With a focus on **access to quality healthcare** and **community connection** the RFDS has continued to meet unmet critical healthcare need and address poor health outcomes for hundreds of thousands of regional, rural and remote Australians.

Access to quality healthcare

For many towns in Far Western NSW, the RFDS is the one and only healthcare provider. A Tibooburra man suffers a heart attack, a person with a critical stab wound at a remote campsite, a motorcyclist run over by a 4WD – the RFDS can provide urgent medical care. A family seeking a health assessment, school students in need of a teeth and gum check, a teenager in need of mental health services – the RFDS can help.

No healthcare provider is immune to market changes, increased competition for talent, rising operating costs, and the growing demand for healthcare. The past 12 months has seen the RFDS innovate, driven by circumstance and changing community need.

Across the RFDS's partnerships, health services and workforce, even its best-known emergency retrieval operation – all layers of the organisation have responded with innovation to ensure its ability to support communities has remained constant.

“People living in rural remote areas have poorer health outcomes for many reasons, a major one being access to healthcare. This is why we are investing in service provision and community connection. This is why it’s really important that we do all the things we do.”

Jenny Beach

> Exhibitions are nothing new for one of Australia’s most acclaimed photojournalists, Mervyn Bishop, but his flight with the Flying Doctor after he suffered stroke in the middle of an exhibition opening at Brewarrina was.

Mervyn is an award-winning photographer whose achievements include being the first Aboriginal press photographer, working for the Sydney Morning Herald for 17 years and taking the iconic 1975 image of then-Prime Minister Gough Whitlam pouring red earth into the hand of Vincent Lingiari, a Gurindji Elder and traditional landowner.

In August 2022 he had travelled from his home at Dubbo to the town of his birth Brewarrina with his daughter Rosemary, for an exhibition opening.

“During the event my daughter Rosemary noticed something in my actions and my speech and was quite insistent, so urged that we go to the hospital,” says Mervyn. “When they checked me over it was a shock to hear the nurse say ‘You’ve had a stroke.’”

“I needed to have a CAT scan and an MRI but Brewarrina didn’t have those machines, so the question was how to get me to Dubbo.” The trip would have been almost five hours by road ambulance, so Mervyn was scheduled for a late-night flight with pilot Brett Croker and flight nurse Kerry Lee Hassan.

At Dubbo Hospital, Mervyn was able to get a CAT scan and MRI, and receive the treatment he required to go on to make a full recovery.

“The RFDS is a wonderful organisation and I don’t know what I would have done without them. To be able to see them at work was incredible and I’m grateful to them for being there when I needed them,” says Mervyn.



Mervyn Bishop on board a RFDS aircraft

Right: RFDS Medical Officer Dr Kiri Oates and Broken Hill Senior Flight Nurse Robin Franklin



Our partnerships help us go further for our communities

> After heavy rains and as the sun sets on a remote property, hours from a hospital, a man rolls his car. With broken ribs and a collapsed lung, he drags himself out, just a few metres, to realise the safest place overnight is back inside the car. Through the long, dark night, he stays until dawn. At first light the property owner finds him and directs the RFDS to the location. A local airstrip nearby is the only suitable space; when the aircraft landed on the muddy strip, it became bogged. Within mere minutes, people came from north, south, east and west to push the aircraft out – partners in NSW Ambulance were there, the community was there, all working together to do what needed to be done to get this man the care he needed.

RFDS
Medical Officer
Dr Kiri Oates

Bottom: AOD
Clinician Ian
Harvey and
MHAOD Counsellor
Peter Crossing

Healthcare cannot be delivered in isolation. It takes a whole system of organisations, services and people working together. Nearly everything the RFDS does to support rural and remote people involves partnerships – with other health

providers, with communities, with individuals. Partnerships are key in the RFDS’s ability to overcome many of the challenges faced, and ultimately deliver the services to communities that need them. The critically injured man with a stab wound at the campsite – may have died had it not been for RFDS working together with several partners. Likewise for the man who rolled his car.

The partnership web is extensive: referral networks, training partnerships, links with Local Health Districts, Primary Health Networks, specialists, technology partners, corporate partners, Trusts, fundraisers, donors, government and community. In the past 12 months, many have directly, and positively, impacted the RFDS’s ability to serve and support communities.

Partnerships with Local Health Districts, Primary Health Networks and governments enable us to deliver services to communities where specific services are unavailable or insufficient to meet demand.



Evolving services and workforce models: general practices, rural generalists

As the need for mental health, alcohol and other drug addiction services continues to grow, partnerships with organisations such as Lifeline enable the We've Got Your Back program, which provides support around mental health, alcohol and other drugs and links people to services in their community; or the Guiding Rural Outback Wellbeing (GROW) program, taking a holistic approach towards early intervention through aquaponics programs in schools and Men's Sheds, as well as education around mental health, alcohol and other drugs, and dietary education.

And partnerships with community – both formal and informal – form the backbone and key link to all the RFDS does. **From those donating to the RFDS, to the publican opening the doors to provide shelter for a patient; From the 'roo run' to clear the landing strip of fauna, to the local community turning out in droves with eFlares for a night landing on a diligently managed dirt airstrips; From the elderly retirees maintaining medical chests with lifesaving drugs, to locals baking cakes to share at mobile clinics** – the work the RFDS has done in the past year, and will continue to do, is not possible without the overwhelming generosity of community, whose partnership with the RFDS makes a difference.

> In late 2022, the people of Warren and Gilgandra – areas of significant health need – were staring down the barrel of losing their town's general practices. Both Councils and community members approached the RFDS to consider taking over the two practices.

The RFDS can now also help to reduce the unmet healthcare need in these regions through its operation of these two newly acquired general practices. In fixed locations, the general practice medical centres enable the RFDS to provide non-emergency, preventative healthcare GP services (such as health and skin checks, chronic disease management), on top of the traditional services the organisation is renowned for.

Combined, the two practices employ 16 local people and provide healthcare to more than 8,400 patients, who now have certainty around their health care.

Complementing our GP services at the Clive Bishop Medical Centre in Broken Hill, saving these clinics opens the door of opportunity for the RFDS. It broadens its suite of health services, and complements the RFDS's Mental Health and Alcohol and Other Drugs services which have been available to these towns for the past five years.

The move into medical centres also lays the foundations for the RFDS to roll out a rural generalist workforce model. Located in the region, a rural generalist moves around – treating an emergency at the local hospital one day, working in the clinic or out on the road the next. They go where they are needed, in a flexible way. The community benefits and it also gives the RFDS workforce an amazing experience; diverse and rewarding. Saving these two GP clinics was a key stepping stone in making this model a reality – a model that exemplifies how the RFDS is shifting and evolving to tackle today's challenges, not only in the services it delivers, but how it delivers them, sustainably, into the future.



Kerri Rothery, Team Leader,
Primary Health Service

Expansion of primary care, allied services and travelling clinics

> A 12-hour drive from Sydney, nestled along the Darling River is the tiny village of Pooncarie. It's the closest upstream town to the magnificent Mungo National Park, and is home to around 266 people, a pub, post office, general store, school, café and a campsite. The closest medical service is a few hours away. With the RFDS 4WD kitted out with primary health gear, two RFDS nurses arrive in Pooncarie for a mobile health clinic.

Already well established, the RFDS mobile clinic program expanded over the past year into new areas throughout NSW including many rural, remote and First Nation communities. Now operating in most remote communities – from Garwin to Enngonia and beyond – the mobile clinics are vital in the RFDS's ability to support communities with a range of health needs: from chronic disease, to dental, to mental health, alcohol and other drugs support.

Early on patient numbers were low, but the word quickly passed around and before long the clinics were overflowing. With over 2,169 clinics, in addition to the more than 1,776 mental health clinics and 666 dental clinics held across the year, the impact on these communities has been immense.

There is huge need, which continues to grow, especially around mental health, alcohol and other drugs – a priority area of attention and expansion over the past 12 months.

"We don't just tick boxes...we aren't only there for your physical health. We touch all layers of community, all aspects of what's needed to have resilience across these vast areas."

Jenny Beach

Victoria Bruggy (left) and William Bennett with their son, Macauley and Tilpa Clinic Coordinator Belinda Bennett



> Vanessa Latham – who leads the RFDS’s Mental Health, Alcohol and Other Drugs program – has seen significant change in the 11 years she’s been with the organisation. Back then, mental health was still relatively taboo, and staff and programs were scarce. Today however, mental health is an urgent priority. Her team has grown, the programs and services offered have grown, and they continue to expand and adjust relative to community need.

And that need – for mental health services – continues to grow. In response, the RFDS has responded to the increased demand.

“We have focussed on continued delivery of core mental health and alcohol and other drugs (AOD) programs, and also on building relationships with community to generate awareness of the mental health services we offer, so if the community need mental health services, it’s easier for them to come and access us,” says Vanessa.

“We’ve expanded with a new mobile mental health/telehealth meeting space van, and travelled into new areas. We’ve established new community health days and pop-up mobile health villages, with the dental van, new mental health van, a tucker trailer, a horse float coffee cart, plus other services are invited to the mobile health village so the community can access health checks, screenings, education, mental health services, while also having fun and socialising,” says Vanessa.

A vital tool in the toolbox for supporting this growing area of need are the RFDS’s three Wellbeing Places in Broken Hill, Dubbo and Lightning Ridge.

“Walking in is like a metaphorical hug,” says Vanessa. “From the moment you step inside, the calmness washes over you. Every detail – colour, furniture zoning, plant life, textures – has been designed to enhance the sense of wellbeing and calm, helping people feel the best they possibly can in these spaces.”

And it’s working. Programs, classes and activities are wildly popular. In the past year, the whole Wellbeing team has delivered 572 activities such as yoga, Thai Chi, guided art classes, as well as wellbeing workshops and information sessions for more than 4883 participants. A diverse group of people use the services – across gender, and age – many are isolated socially, and find it’s a safe and calming place where they can engage to maintain their wellbeing, and also seek support with mental health and wellbeing across the spectrum of acuity.

“When RFDS talk about health, it’s not just about delivering a service in one moment ... it really is holistic health – it’s not just your blood pressure, or your heart health, it’s about being part of the community, understanding how people in remote communities feel, and what support they need. The RFDS help to bridge these gaps for community through expanding and evolving where needed,” adds Vanessa.

Broken Hill Wellbeing Place Peer Host Coordinator Kate O’Meara with Trevor Edwards



Broken Hill Wellbeing Place staff (L-R) Peter Crossing, Kate O’Meara, Ian Harvey, David Doyle, Vanessa Latham, Kayelene Crossing, and Anne Te Kawa

Community Engagement Coordinator Annette Ohlsen
Below: Broken Hill Visitor Experience Services Manager Andrew Wilson



Creating connections

The RFDS is more than a provider of healthcare services. It is also a connector of people, a connector of community.

> On route between Innamincka, and Durham Downs station for one of over 4,600 RFDS primary health, mental health and dental clinics held in the last year, was a sight Annette Ohlsen will never forget.

"It was as if I was staring deep into the veins of the earth," recalls Annette, who is the heartbeat of the RFDS Community Engagement team.

"After the rains, flying over magnificent Channel Country was a world of intense colour – gorgeous green and bright blue brimming waterways, surrounded by striking red dirt, there was an immense sense of peace and tranquillity. I felt like there was no one else around."

But within minutes of landing, Annette would be surrounded by people – welcomed by community on the ground, who went above and beyond to help the RFDS make the clinic a reality.

"Before we landed, a 'roo run' cleared the runway of horses, kangaroos, cattle, emus – you name it. Our well-trained pilots landed smoothly and safely. Then as we wove our way along the dirt road towards the homestead, the smell of freshly made donuts wafted through the fresh country air," she recalls. "The station's cook was baking morning tea for us."

From the 'roo run' volunteer, to the cook, the RFDS relies on a huge network of people out in community. Elderly retirees, farmers and their families, teachers, miners, pub owners. Some new, others who have helped the RFDS for generations. This community of volunteers is vital to what the RFDS does.

> Well after dark, an RFDS pilot was called to a remote station in Far Western NSW. The station had no runway lights. The RFDS contacted the station owner and a nearby mine – within 15 minutes, a wave of vehicles arrived packed with people who had come to help prepare the eFlares to illuminate the airstrip. The community dropped everything to come together: medical, logistics, locals from the community, all came to help. This was the pilot's first ever landing on flares. And a great outcome for what could have been a very difficult situation. An outcome achieved through community connection.

"They help open clinics, maintain the rural runways we land on, and re-stock medical chests with life-saving drugs. They meet us when we arrive, unload our gear, take us to the local hall, or the SES shed or out to the shearer's quarters; they help us during the day; they take us back at night; they make sure our pilots have somewhere to rest while the clinic is on; they'll clean the building ready for us. Without them, we couldn't do it. They are part of our service, without them we cannot operate. We are a community," says Annette.

Annette is passionate about community and rural health. Growing up on a station herself, she knows first-hand what it's like to live remotely. She also intrinsically understands the importance of the RFDS embedding itself closely with its community – not just the community of volunteers, but the many rural, regional and remote communities in need of health care and social connection.

And over the past year, the RFDS has enabled community connection at a significant scale. People have travelled hundreds of kilometres for RFDS health clinics, education, fundraising events, family health days, support in times of crisis such as floods, and even for the chance to connect socially, when they may not have regular opportunities to do so. The RFDS has driven a mind-boggling number of events, initiatives and programs which support communities to connect. Connect to health services. Connect to people.

Connecting in times of crisis

> Menindee in Far Western NSW went from one climate extreme to the next. After years of endless drought, early 2023 saw the town plagued by floodwater. Most of the community was under water and evacuation was swift. The community was dealing with a lot. Leaving their homes, insurance worries, delays getting back into properties, and fear of the unknown. The RFDS brought all its services to the community and worked with the Local Health District and Salvation Army, to give people the support they needed – from food, to monetary support, to education, to simply just having a coffee and a chat. Mental health support was in high demand. “But predominantly people just wanted someone to talk to. Many people didn’t realise they needed these services until they saw us there,” recalls Annette.

Likewise in Tilpa, during the flooding crisis, connecting communities – to each other and to information and services – was a critical priority. A small village on the Darling River, surrounded by farming country and stations, this community was completely cut off from RFDS services entering by air or road, for five months. As the only health service in this community, the RFDS arranged for emergency medication and new medical chests to be flown into the region and ensured access to telehealth over the phone with ongoing monitoring and regular check-ups on physical health, mental health, and wellbeing.

“From edge to edge of the SE section, it’s an eight-hour flight. When RFDS comes to a local town hall or pub, everyone comes together, and this may be the only reason these people connect in that month.”

Annette Ohlsen

Events to unify and unite

> As Aussie music royalty Missy Higgins, Jimmy Barnes, and Kasey Chambers rang out over the loudspeakers of the three-day Mundi Mundi Bash (August 2022), the RFDS team were hard at work. As charity partner for the outback music festival, the team was supporting fundraising activities and connecting with many of the 12,000 festival goers about the importance of the RFDS’s lifesaving work.

2022’s four-day Mundi Mundi Bash raised over \$90,000 for the RFDS; Hungerford Field Day raised \$30,000; Packsaddle, Louth, Yunta and Milparinka – these are just some of the communities that organised events to bring people together and raise money for RFDS to help keep the service alive.

Read more about the Mundi Mundi Bash [here](#).

> In the 1870s, the discovery of gold sparked a rush to Milparinka, one of the most remote regions of NSW. Today it has a permanent population of just six. But in 2022, over 400 people and a few truckloads of horses made the pilgrimage to Corner Country of Far Western NSW, for the annual Milparinka Gymkhana. From the traditional barrel races to ‘slice the melon’ where competitors cut melons in half while moving at speed on horseback – the events were diverse! But it brought community together, for fun, connection and to raise funds to support the RFDS, a much beloved charity in these parts.

“Our communities not only use our service, they also give back: they volunteer, they hold events to fundraise so we can run important activities and events which provide access to healthcare and which also shows community that we are more than a provider of primary healthcare, we are a connector of community,” explains Annette.

Family photo days, community health villages, mental health days, women’s health days, wellbeing fly arrounds, telecommunications roadshows, First Nations women’s resilience days, cultural immersion days. It’s an extensive program of events and activities, and the impact is immense – far beyond health alone.



The Mundi Mundi Bash in 2022 raised in excess of \$90,000 for the RFDS



Family Photo Day

> It was dubbed the Family Photo Day, and over 100 excited families came from far and wide to have their family portrait snapped and printed, to take home and hang on their gallery wall or rest on their mantle. The day built and strengthened relationships with community outside the perception that the RFDS is 'just' a health provider. "It showed we are here for their wellbeing and social connection too".

Wellbeing Fly Around

> Being a ringer is not for the fainthearted. A vital part of the stock staff along with Jillaroos and Jackeroos, it's a job that has all the adventure of living and working on remote cattle stations. But it's tough work, long days, and physically and mentally trying conditions, often in blazing heat, and searing sun. Aussies know too well the dangers of the sun – with one of the highest rates of skin cancer in the world, two thirds of us are diagnosed before the age of 70. But for most young ringers, the last thing on their radar is skin surveillance, let alone a check-in on their mental health and wellbeing. The RFDS work hard to make sure these things don't fall through the cracks. And when the RFDS Wellbeing Fly Around – with a mental health specialist, dermatologist, and hairdresser – came to Cooper Basin, Bollards Lagoon at Cameron Corner, Innamincka and Noccundra, station owners brought their young ringers in droves.

Women's Healthy Living Days

> At one recent health clinic in remote NSW, it was discovered a large number of First Nations women had never been offered a full health assessment. It's well documented; the more remote you get, the greater the challenge of accessing medical services and social connection. Which is why the RFDS took nurses, a mental health worker, a breast care nurse, and some great food, to the furthest corners as part of its Women's Healthy Living Days program. Women came together for health checks, for conversation and education around the latest information concerning women's health.



Girls learn all about what a potential career in aviation looks like during the Women in Aviation Day in Dubbo

Yunta Womens' Health Day



Programs to connect, enhance mental health & wellbeing

> Eliza used to work as a governess, or 'govie', on a remote station between Tibooburra and White Cliffs. She now uses that experience to provide the vast network of 'govies' with much needed support, though her role at one of the three RFDS Wellbeing Places.

As a 'govie', her story is a common one. Predominantly young women, barely 18, move to the outback to help educate and care for kids on rural and remote properties. The reality hits quickly that life as a 'govie' is not like the McLeod's Daughters television series. The challenges are vast.

"It was a huge culture shock. In the middle of nowhere, amidst a harsh drought, covered in dust, nothing but red dirt as far as the eye can see. The stress of drought, financial woes, and social isolation were tough," she says.

For many 'govies', adjusting to isolated life in the bush is challenging. They can experience anxiety, depression, home sickness and are navigating new and sometimes complex relationships. Which is why the RFDS co-created a program to network 'govies' with each other, provide them with important social connection to enhance wellbeing, and also give guidance around other issues such as safety, and help them build resilience to live in these remote areas.

Listen to Eliza talk to The Flying Doctor podcast about helping govies on [Apple](#).

Eliza Emmlin at The Wellbeing Place



Also, for station owners, challenges can come thick and fast. Depression rates are high, loneliness and lack of human connection is common, and issues such as drought, financial pressures all have significant impact on mental health. To tackle these challenges, the RFDS in partnership with Lifeline currently has 4 trained Champions as part of the 'We've Got Your Back program'. These 'champions' are local graziers who themselves have been through hard times. They are a vital link in a chain of support, connecting with station owners to have conversations about mental health, providing advocacy for people impacted by drought and illness, and helping others in their community to access services they may need. In this financial year, 58 people reached out to a Champion – of which nearly 70 per cent were men – to talk about issues such as stress, depression, relationships, grief and the floods experienced at the beginning of the year.

Bruce Duncan and Richard Wilson from We've Got Your Back



Strengthening cultural connection with holistic health

> A group of young Indigenous women stood in the kitchen of a local restaurant in Menindee, NSW, watching the local chef slice native ingredients. David Doyle felt immense pride. He knew this was the start of something game changing for his community.

"I was contacted for an on-country tour for a group of disconnected local high school students. I quickly realised we could do more for them," says David.

David Doyle cares deeply about wellbeing – of community and of country. He has been educated as an Aboriginal Health Practitioner and as a Barkindji and Malyangapa Aboriginal countryman by his Elders. With his combined knowledge of western medicine and First Nations ways of life, he has a passion for holistic health and educating people about country, especially the abundance of plant life, which can contribute to benefits in overall health and wellbeing.

Driven by this passion – for country and a holistic approach to health and wellbeing – David has helped develop several programs for the RFDS, which, although in their infancy are already having huge impact – both within the RFDS and with the broader Indigenous community.

"When I watched these young Indigenous women chopping and cooking with native ingredients, engaged in learning skills they can use in a career pathway, I just thought 'wow', this opens up doors of opportunity and possibility for these women and their communities."

Helping David design the 'Women's Resilience Program' was Sophie Zaccone, a landscape architect with a psychology background, and the RFDS's Vanessa Latham, Head of Mental Health, Alcohol and Other Drugs.

Also taking a holistic approach to healthcare, the Mental Health team has also created the GROW program; a wellbeing engagement platform servicing schools and communities in rural and remote areas across Western NSW. The GROW Aquaponics Program supports schools with GROW Units that assist with STEM outcomes, sustainable food production, healthy lifestyle choices and early education and intervention for Mental Health, Alcohol and other Drugs. The GROW Community Program provides wellbeing education, support pathways and facilitates events to bring health and wellbeing services to isolated communities.



David Doyle visiting a Men's Shed

Continued improvement to meet community needs

“Principals have reported higher attendance on GROW days. Kids are coming to school and they are more settled,” says Vanessa.

These programs, along with other RFDS services such as its Wellbeing Places, exemplify the importance of taking a holistic approach to care, putting people at the centre, the whole person, not just their health needs.

“We have to look at people as whole humans, not problems. And when we do this, we can have huge impact on people’s lives. We (the RFDS) can connect people with healthcare, and we can also provide social outlets for those who may be isolated, create skills for jobs, improve mental health and wellbeing through other ways,” adds David.

“We have stated a journey to greater cultural connection through a holistic approach to care ... and we are moving evermore towards being better. But there is more to be done.”



Above and left: learning about aquaponics through the GROW program

Right: Henry McAlpine, one of our smallest patients

And the RFDS continues to push its limits to do better in how it connects with and supports community, never resting on its laurels.

The RFDS’s Board Regional Advisory Committee – RAC – plays an important role here. Made up of community members, some also RFDS board members, the RAC has provided feedback from community to the RFDS around the big questions: ‘What can we do better? What’s working? What’s not?’

In the last 12 months exploring this feedback has led to a range of activities around promotion of specific areas of health – such as July’s focus on eye health. RAC has also brought a broader lens to planning and developing into the future – across how it can better support communities, maintain excellence in safety, quality and performance, partner for greater impact and support its people to enable better access to healthcare in remote areas and achieve improved health outcomes into the future.

“There is a sense of protectiveness around RFDS. Speaking to anyone who has used a service provided by the RFDS, they don’t want anything to happen to it. They don’t feel like we are just a doctor of the day, which is indicative of our focus on community and how closely we embed ourselves with the people we serve.”

Robert Town



Retrieval Medical Officer
Christophe Duchatelet and
Former Flight Nurse Ben Turner



Excellence in safety, quality and performance

A safe pair of hands, tackling vast challenges, delivering to the highest of standards.

> A major thunderstorm loomed on the horizon. A patient in Walgett lay injured by a falling tractor tyre, and another in Lightning Ridge deteriorating with abdominal pain. The RFDS retrieval team had only one option. Retrieve both swiftly and get them to care before the thunderstorm hit. With world class training in the RFDS simulator, a flight ready aircraft, and behind the scenes teams working to the highest of standards – the team safely avoided the storm, albeit through 100km/h winds, and delivered the patients to the care they needed.

“Day, night, dawn and dusk, in thunderstorms, lightning, snow and sand, rain, ice, and turbulence. Accidents and medical emergencies don’t wait for fair weather,” says Justin Marr, General Manager Aviation.

“Tragedy can strike in the middle of the night; when it’s storming or foggy – the flight conditions are rarely ideal. The airstrips are often made of packed dirt. Galahs and kangaroos are regular obstacles. RFDS pilots must deal with all conditions, with critically ill and vulnerable people on board,” he adds.

However, it’s not just weather and environmental challenges that the RFDS has tackled in the past year to ensure continued delivery of safe, high-quality, reliable services that are efficient, financially sustainable and highly valued.

Skills shortages, patchy connectivity, supply chain issues impacting availability of assets and parts, evolving services, changing contractual obligations, increasing costs and rapidly shifting digital environment around technology, security and risk. The challenges are extensive, and at times relentless, but through them all, it remains one of the RFDS’s top priorities to maintain safety and quality to the highest of standards.

“We need to be safe, we need to be high-quality, we need to be reliable. People trust us to be these things, and more. They expect us to have high standards,” says Robert Town, Head of Clinical Governance.

“We’ve accepted a challenge to provide as close to quality of care in remote areas that you can get in urban areas. And those who deliver that hold themselves to that high standard.”

And those standards are indeed high. According to RFDS strategic plan (2023-2028), by 2024, success will include “at least 95% of people stating they were satisfied with the service we provided”, increasing to 99% by 2028.

To enable those aspirations, and maintain high standards of excellence in safety, quality and performance, RFDS has been innovating from within – across its people (ways of working, training), assets, digital tools and transformation, its partnerships and its approach to continuous improvement.

Adapting to new ways of working



Broken Hill Pilot Dave Rogers



Apprentice Aircraft Maintenance Engineer Harry Gresham

> As an RFDS Broken Hill based pilot flew into Tasmania for the first time, the differences were stark. No longer surrounded by familiar flat red earth plains, he now navigated a runway surrounded by Tasmanian hills, plus winds and heavy fog.

For most RFDS pilots, this scenario – flying to a different base other than your home base – was once unheard of. It wasn't needed, with a steady stream of skilled workers across all bases, but as post-covid workforce challenges continued to bite, the RFDS had to innovate.

“Our pilots can now fly to any other base without a hitch, and we've drawn on this capability significantly in the past 12 months,” says Cameron Gibbs, Chief Pilot for the RFDS South Eastern Section.

Other changes in the past 12 months have also contributed to creating a more adaptable workforce to help solve current workforce challenges, and maintain excellence.

“We have prepared the groundwork for a fly-in fly-out model to manage the provision of flight nurses operating from the Broken Hill Base. This has resulted in an upturn in interest from professionals who are enthusiastic about working out of a regional base, but living elsewhere, such as western NSW, or metro centres.

“We've also shifted strategy around recruitment and apprenticeships, to attract people and upskill them to a level where they can work on our aircraft and deliver our services.”

> Harry is a local country boy, come RFDS engineer. He is part of a new wave of recruits made possible through a recently developed apprentice scheme where the RFDS works with local schools to attract local people who are more likely to stay in rural areas, and also stay at the RFDS. It was at a careers forum in his high school gym where Harry's interest piqued. After graduating from school, Harry volunteered with the RFDS and has now been appointed as an apprentice. He is an example of how RFDS is growing local talent who are vital in the future of delivering healthcare in remote and rural areas.

From Harry the apprentice engineer, to [Kristy the flight nurse](#), to flight simulator maintenance staff who now receive training in flight devices and aircraft – the RFDS is being more innovative in how it attracts, retains and grows its people. By providing new avenues to learn knowledge and skills, it gives people a pathway to advance their careers. It is also a pivotal factor in the RFDS's ability to ensure its people are skilled, and available, to deliver safe, high-quality, reliable services that are efficient, financially sustainable, and highly valued.

Complex infrastructure and assets underpins everything

It's not only our people, it's also assets needed across aeromedical, road transport, support provided to hospitals, mental health programs ... Across the whole gamut of services we provide, there's a criticality around each element being functional and available, which is challenging in itself and more so following post-covid supply chain delays and increasing costs," says Claudio Grasso, GM Operations and Service delivery.

> Up to five aircraft windscreens are replaced each year at the RFDS. Pre-covid, this was a simple, and fast, task. Purchase, deliver, install. But ongoing supply chain issues now see a delay of 250 days before a new windscreen arrives. Earlier this year, with two broken windscreens, the RFDS faced the serious threat of two aircraft being out of action for over half the year while waiting for delivery of the new windscreens.

This was not an option. To ensure they could keep operations going, they did something not done before – removed a windscreen from an aircraft undergoing rectification from hail damage more than 12 months ago, while also investigating the compliance around using decommissioned aircraft as a source for parts.

"I often refer to it as a jigsaw puzzle. We need all pieces of the jigsaw available every day to deliver the service to the highest of standards," adds Claudio.

Digital transformation across the RFDS is playing a key role in ensuring assets are accessible, and can play their part in achieving excellence. In fact, digital transformation is enhancing excellence more broadly across the RFDS.

Engineers (L-R) Scott Hammond, Harry Gresham, and Jayden Foster



Driving excellence through digital transformation

Globally, the digital environment has shifted drastically: cybersecurity has become a high priority issue for organisations, and those that aren't transforming digitally risk opening themselves up to threat. Meanwhile, rapid advancements in technology have created new possibilities for provision of healthcare and ways of working.

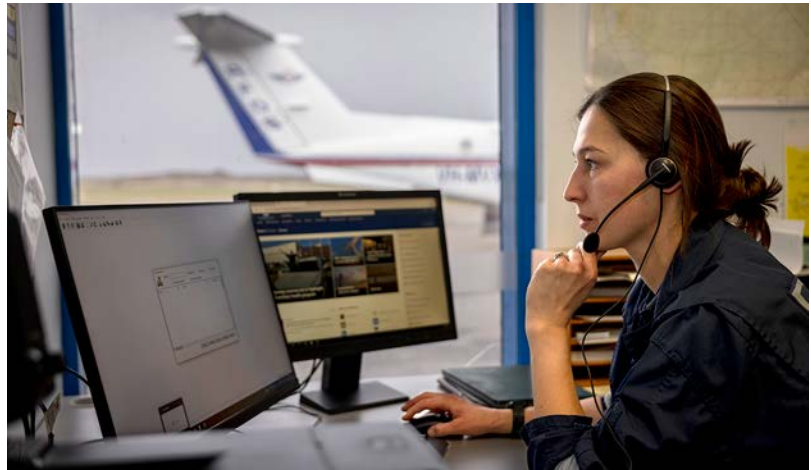
Over the past year, the RFDS SE section has collaborated with other RFDS sections, to improve resilience to cyber risk, improve efficiencies across the workforce, enable more effective and streamlined ways of working; and improve the ability to care for patients and deliver services in remote areas, safely and efficiently and quickly.

"We are investing in technology to ensure we are always delivering first class care regardless of how remote we are, or what challenges we face. In particular, thanks to seed funding from a donor, we developed and launched an Electronic Health Record (EHR) app that works in the air, even without WIFI," says Maria Cade, who leads the RFDS's digital transformation.

"Our clinicians do so much in the air, or out on remote stations. They need a tool that works even when there's no connectivity – which is a frequent occurrence. We also needed a tool to drive efficiencies."

> **A critically ill patient with low blood pressure, needs two cannulas, three units of blood and a breathing tube inserted within 30 minutes. At the same time, the flight nurse is required to record – with pen and paper – blood pressure, how many fluids they are using, and other administrative information, then type it into a computer after they land. Meanwhile an RFDS doctor is tasked with an audit to identify how often a particular piece of kit is being used. Wading through 18 months of documentation is a hugely time-consuming task – until the introduction of the Electronic Health Record app.**

Launched in early 2023, the EHR is already proving invaluable. Given the criticality of sensitive patient medical records, it ensures information redundancy in an environment where internet connectivity is either restricted or completely non-existent. It allows clinical staff to create digital patient health records with minimal friction while they provide in-flight medical support to patients in need. It allows the in-flight doctor and nurse to work on it simultaneously and amalgamate information in real time. As soon as the plane / person comes into connectivity the data syncs and a full record of care is printed out and provided to paramedics or hospital staff.



Medical Officer Dr Kiri Oates

Ultimately, it reduces human error, speeds up patient data sharing and makes patient care more efficient. The RFDS is often dealing with life threatening situations, and the EHR makes every second count.

Dr Kiri Oates, Emergency Medicine and Retrieval Registrar for the RFDS, says the EHR is also an effective tool aiding instantaneous research to improve operations and outcomes.

"The EHR has huge potential for research, it allows us to delve into our retrieval data, analyse and very quickly identify: how much are we using this bit of kit? Is this something we really need, or can we try a lighter piece of kit? This medication has a short shelf life, how often have we been using it?"

"With the EHR, it's an instant search, and you can drill down to minutiae. You can analyse morbidity and mortality, to give more accurate data to see where we can focus in the future and ensure we maintaining up-to-date practice."

EHR isn't just enabling efficiencies across the workforce and more instant patient care, it's also elevating excellence in safety, quality, and performance through its alignment with standards designed into the tool.

"EHR complies with standards, for example consent for blood delivery – there are a lot of processes that occur with blood; there needs to be consent and a myriad of other considerations. EHR has a camera built in to enable a photo of blood pack labels to be taken and attached to the evidence for blood delivery. For standards around recording fluid volumes, the EHR can record how much fluid has been given, and if any fluid is lost through catheter or blood loss," says Robert Town, Head of Clinical Governance.

While the EHR may be the star of the RFDS digital transformation journey this year, there are some other hard working digital innovations introduced, which also serve to enhance excellence:

Asset tracking

In the past year the RFDS has implemented a digital platform for assets, to track maintenance and monitor assets which reveals new possibilities such as – in the case of the broken windscreens – removing windscreens in the visitors’ centre aircraft so “we can have spares available if this happens again.” This asset platform helps the RFDS manage its maintenance requirements, better understand the time it takes to drive efficiencies in how it delivers the service, and also monitors the reliability of assets and components.

Aircraft tracking and monitoring

The RFDS always keeps track of aircraft positioning and monitoring. With position reporting resolution as low as 1 second, using data from many available sources including Satellite and Cellular communications protocols, the Operations Centre can see precisely where every aircraft in the fleet is at any moment. Further, all this flight following data is captured and stored so it may be referred to for later use or to provide business insights.

Connectivity in mobile clinics and mental health services

As part of a unified national approach, Starlink is now used in dental vans, and mobile clinic vans. This enables connectivity for those services, to update and receive patient data and records instantly, and securely. It also aims to boost connectivity and efficiency for the remote workforce. Similarly, in mental health services, the Mantle platform is used for mental health patient records and remote consults. And continued use of Activ8me remote satellite internet has expanded connectivity at all RFDS bush clinics.

Training technology

With one of the most technologically sophisticated flight simulators in the South Pacific – testing pilots in challenging situations so they are ready to fly rain, hail, or shine – the RFDS pilots are amongst the best trained in the world. Tied intrinsically into the primary focus of the RFDS to provide services to more people than ever before, it has worked to expand its digital technology across aviation, engineering and training. There is no better evidence of this than at the RFDS base in Dubbo, where millions of dollars – a Gift in Will from a generous supporter – were invested in creating world class aviation training facilities and a dramatic expansion of engineering capabilities. Enabling the RFDS people to remain on the cutting edge of innovation in aviation and aeromedical healthcare.

Laying foundations for the next phase of digital transformation

“In the last 12 months, we’ve started the groundwork work for some big transformation in coming years,” says Maria Cade. From establishing a leadership group to drive national standards around data and digital in health, to laying foundations for a massive data mapping exercise, and starting the process to enable Bluetooth connectivity for equipment into the EHR, there are some big moves, with huge impact, on the horizon.

“The web of impact from partnerships is extensive. We work with partners to raise standards; we work together because we have common goals. We help the community and that’s the priority.”

Claudio Grasso

Left: Simulation Pilot Ashley Myles

Right: Dubbo Dentists Angela Browne and Clancy Holmes Smith



Continuous and rigorous improvement of our health services

"Our goal is to keep getting better," says Robert Town, Head of Clinical Governance. Robert provides leadership and support to a diverse team – health quality and safety, community engagement, infection control, education, and health information.

He is also in charge of quality for health services – he has access to satisfaction responses from clinics, and ensures all RFDS staff are meeting standards and regulatory requirements. He is introducing new ways to measure these things, considering many of the RFDS clinics are in remote areas without internet.

"We are always pushing the envelope to continually improve how we do things," he explains. And they do this in a number of ways.

Community feedback

> When Annette Ohlsen travelled to 21 community clinics in the past year, there was one thing she always prioritised. When she's out in community, she pulls up a chair next to patients and has a chat. She finds out how things are going, what they need and how the RFDS could do better for them.

National standards stress the importance of partnering with consumers (patients and carers) and having them involved in care plans and other areas of their health and wellbeing.

"We embrace the consumer's right to be included in decisions, challenge decisions; and consequences. And we also focus on health literacy to help patients and carers be more informed," says Robert.

Community feedback is important in shaping services for the RFDS and its ability to deliver excellence in safety, quality and performance. And in the past 12 months, through online and phone surveys, and one on one formal and informal feedback opportunities, it's reinforced there is a positive sentiment towards the RFDS. It's informed the evolution of the RFDS through internal changes, and services such as GP medical centres. It has also helped inform the foundation of our work around PRIMM (Primary Care Rural Innovative Multidisciplinary Models). This work, funded through a grant by NSW Health, is focused on building sustainable health workforce models specific to the communities of Bourke, Walgett, and Brewarrina.

Primary Health Nurse Robyn Fidge and Nurse Team Leader Carol Doyle

Above: General Practitioner Dr Paul Lunney

79 audits, 15 re-audits in 12 months – a continual cycle of assessment

The RFDS proactively checks clinical performance, quality and safety, security, operations and regulatory requirements through annual audits. Like painting the Sydney Harbour Bridge, the audit process is a continual cycle of assessment and improvement. From a clinical perspective, the audit team meets with leaders from retrieval, mental health, dental, primary health teams, reports on audit results on a monthly basis and creates action plans to correct issues. Team leaders then train and mitigate risk through a number of strategies. Underpinning this, is organisation wide audits to ensure we are always meeting regulatory standards, such as ISO 9001, and driving service improvements across everything from training and flight operations through to fundraising and employee engagement.

Understanding risk as a modern healthcare provider

The RFDS does not exist in a vacuum, and as the organisation adopts more technology, creates new partnerships and expands into new areas, new touch points for risk can be created. To effectively understand our risk profile in a modern context, the RFDS has launched a risk management improvement plan to evolve and improve a data-driven method of assessing risk and control effectiveness. This will provide a roadmap of enterprise level risks, controls and opportunities for improvement that will help guide the RFDS into the future.



The future of excellence in safety, quality and performance



NEPT Registered Nurse Micheal Harper

Building internal capability for continuous improvement

How the RFDS people work with each other can also impact excellence. In the last year, the organisation has enhanced its collaboration with other RFDS sections, and how its own people work together. It's streamlined efficiencies across the workforce, enabling teams to work more closely on key initiatives, reducing operation in silos, and costly re-inventing the wheel when far more efficient ways of working were available – e.g. EHR.

R&D for continuous improvement

Ongoing research and development, innovation and impact measurement are one of the RFDS's top funding priorities. And the RFDS continues to invest in research and development to address needs as they arise. Alongside suppliers, we have developed a new medical interior to integrate a Stryker Stretcher into our aircraft to make the transfer of patients more comfortable. Research has also been fundamental in ensuring the RFDS provides culturally appropriate support to First Nations communities and in the past year has undertaken, or supported, a variety of research aimed at continually improving the delivery of the right services to Indigenous communities.

At 95 years old, there may be a perception that the RFDS still does things like they always have. When it comes to standards of excellence, this is true. But across the entire organisation, the RFDS has adapted. It is a modern, innovative organisation, which continues to deliver the highest quality care for all, even in the most remote locations. And the RFDS is constantly working to ensure it's ready to go no matter what. It is unquestionably a safe pair of hands, tackling vast challenges, delivering safe, high-quality, reliable services to the highest standards.

Dubbo Visitor Experience



"The RFDS continually seeks community feedback and pivots when needed – drawing on our highly experienced specialist workforce, our critical infrastructure and of course our broad health care delivery capability."

Annabey Whitehead

Brendan Cullen from We've Got Your Back



Partnering for impact

As a critical part of the health system's front line – delivering better health outcomes in regional, rural and remote NSW – the RFDS is part of a complex network of partners that deliver care to where it is most needed.

> Drought, financial pressures, and isolation are some of the most common triggers for depression in rural communities. And in the past year, a partnership between the RFDS and Lifeline has continued to help bridge the gap in mental health support in rural and remote regions.

"About six years ago I felt I was losing control of everything, drinking to cope. It became difficult to communicate with my wife and my kids," recalls Brendan Cullen, a farmer who runs a 60,000-hectare Station, 60km outside Broken Hill.

"It took all my courage to reach out and get help. It was tough. I drove to the hospital by myself, walked up the steps and said "I need to see a doctor, I need help."

Brendan was diagnosed with depression, the weight lifted off his shoulders and set him on the road to recovery.

He is now a trained 'Champion' for the RFDS and Lifeline 'We've Got Your Back' program - a mental health peer support program that engages people around mental health, provides advocacy for people impacted by drought and illness, and links people to services in their community.

"My role is like a portal, I act as a link between the individuals in need and the clinical side / services. I help my peers. People are screaming out for help, they get in touch by phone, in person, email, text," he says.

Whichever the mode of contact, people are reaching out to Brendan, and several other Champions who use their experience to help others channel where they need to go to get help. They are a safety net on the ground to support the community. In this financial year, 58 people reached out to our four Champions over the phone or in person for support, shifting the dial on how people feel about talking about mental health issues. Feedback from past participants revealed that 100% said they are more likely to engage with a formal mental health service after speaking to a Champion.

"I love being there for people, it's my greatest joy and I've seen people come out the other side in a better space. It's a program that works," Brendan says.

It's a program that works. It's a partnership that works. And it's one of many important partnerships – with communities, governments, private sector and non-profits – which the RFDS has nurtured in the past year, to achieve maximum positive impact.

The importance of partnerships

RFDS has an amazing reputation and contributes – in clear ways – to many of the health challenges that are affecting Australians. But they can't, and don't, do it on their own.

“We cannot do the important work we do without our trusted partners,” says Annabey Whitehead, GM Corporate Affairs and Fundraising.

Whether it's partnering with referral networks, public health networks, specialists, technology, training, corporate partners, Trusts and Foundations, individual supporters, or with community and government, when we are partnering, it's to amplify the impact we have. So we choose partners carefully, we create real, long-lasting relationships – relationships for a lifetime.

The future sustainability of the health system, and in making a positive impact on health outcomes for people, undoubtedly relies on different organisations, policy makers and communities all working together to evolve the delivery of services into the future.

“There are challenges to be overcome which have created a pressure cooker situation for stakeholders and communities in the past year – policy, workforce, funding pressures, increasing costs, rising demand for healthcare, hindered accessibility to healthcare. And healthcare indicators are not where they should be – people in regional areas have poorer health outcomes than those in metro areas.”

“But from challenge comes opportunity – around technology, different employment models and different ways of delivering services that we haven't used in the past across the health system, not just the RFDS, and partnerships are key to this.”

Ongoing partnerships with government (Commonwealth and State) enabled the RFDS to provide around 4,700 aeromedical retrievals and non-emergency patient transports over the year, transporting people living, working and travelling in rural and remote Australia to the urgent hospital care they needed. And in true RFDS spirit, it continues to provide retrieval services to Lord Howe Island, as one of the very few aeromedical services approved to access the island.

An expansive web of partnerships with local service providers, primary health networks and Aboriginal Community Controlled Health Organisations enabled comprehensive, coordinated and continuous delivery of primary healthcare services – which are co-designed with the local community,

consumers and carers, as well as partner organisations – to address specific areas of need. For example, the RFDS and the Australian Stroke Alliance partner to develop and test brain scanners which help to determine the type of stroke a patient has experienced, and inform treatment; The RFDS and Lifeline We've Got Your Back program focusses on mental health; GROW program, partnering with local schools, is centred around prevention and early intervention.

Strong and committed partnerships with Aboriginal and Torres Strait Islander peoples and communities, are centred around building local, community-led solutions for Aboriginal and Torres Strait Islander peoples to help improve health outcomes. Partnerships focussed on holistic care have enabled initiatives such as the Native Barkindji Edible & Medicinal Wellbeing Garden to commence. A combination of Indigenous and non-Indigenous Far West locals came together to learn about plants and their healing benefits and drafted a design for a 'wellbeing garden' concept.

Primary Health Nurse
Belinda Gentle



Supporter partnerships for broad impact

Thanks to the enormous generosity of our supporters across the community, events, volunteers and 94,000 supporters who make our work possible raising around \$28 million in the last financial year. Their collective efforts directly support our frontline work in rural, regional and remote Australian communities, allowing us to tailor our healthcare services to meet their specific needs and ensure ongoing access.

“It’s phenomenal and comes down to the incredible and diverse ways the community supports our work, such as festival goers at big events like the Mundi Mundi Bash, through to everyday Aussies who dig deep giving what they can,” says Cristina Caamano, who as the Planned Giving Manager connects our supporters to the work on the ground so they can see the invaluable impact of their generous support.

Cristina stewards our supporters who give In Memory of a loved one and those who leave legacy gifts, where compassionate supporters choose to leave a gift in their Will to support RFDS SE Section. Working alongside supporters at RFDS means the world to Cristina, with a background in Psychology and working in the not-for-profit sector, she was inspired to join the RFDS in 2020 to help make a positive impact for equal access to health care across Australia.

“In Australia, less than 8% of people who pass with a valid Will leave a gift to charity, but the RFDS are blessed to have many wonderful, diverse, wide-ranging supporters who make a deliberate decision to invest in the future of our communities, and also in the future of our service... their generosity has a huge impact.” Their impactful investment quickly reveals that partnerships with donors are not only hugely uplifting stories, but they underpin the legacy and true value of the RFDS in community.

“Over one third of funding comes from supporters – we truly couldn’t deliver the service without them. Every gift matters, no matter what the size. They are critical in enabling our services to reach rural, regional and remote communities. Gifts can go towards funding a piece of equipment, a role, a service. Our supporters are all part of making sure a moment of crisis in the outback doesn’t turn into a tragedy. When a call comes in, we want to be able to continue to answer that call.”

We are humbled by the ongoing generosity and commitment of our supporters, and we go above and beyond to be true partners – connecting supporters with our work and helping supporters to understand the impact of their contribution on the frontline every day.

“Getting supporters connected to the area of service they are most passionate about and providing them with transparency about the impact that their gift delivers, is incredibly important to us.”

Outback Car Trek



> The late Dr Stuart and Mrs Bonnie Bartle were eager to leave a legacy that would benefit outback communities in a way that aligned with their own family's values, as they believed that every Australian, regardless of where they live, should have access to high-quality healthcare.

In early 2023, the RFDS received Stuart and Bonnie's generous bequest and it has already provided critical mental health services, such as those offered at our Wellbeing Places in Broken Hill, Dubbo and Lightning Ridge. To see the impact of their legacy, the Bartles' nieces, Emma and Anthea, had the chance to visit the RFDS Broken Hill Wellbeing Place this past May to meet with the Mental Health teams.

"Bonnie and Stuart would often talk about the Royal Flying Doctor Service to us. Our family values are about love and connection. And coming from a large family they always believed it was important that people had care and connection and love given to them no matter where they were in the world, and no matter who you were, or what background you came from. To have access to care, be it medical, spiritual, or social was really important to them," says Emma.

"I think the hardest thing is they can't see the Wellbeing Place for themselves. So, I think I would say to people who are thinking about leaving a gift, it's a really great opportunity to come out and see those places while you still can. It has made us feel so incredibly proud and humbled to get a glimpse into the world of the RFDS and to share what this incredible organisation does with our friends and family."

> "I appreciate the tour, but I might not want to go inside the plane because that was one of the worst days of my life," Cristina recalls a supporter telling her during a behind the scenes tour at the Dubbo base.

The RFDS had touched this man's life twice: first when he needed critical surgery and was transferred to get the urgent care he needed. The second many years later when his daughter was emergency retrieved after a car accident.

"Donating to the RFDS was an obvious choice for him. No-one in his family was surprised," says Cristina. "But what did surprise them was what we did following the donation, and what they discovered."

The RFDS team invited the donor and his family behind the scenes, to show them exactly how his bequest will be used, and the impact it has – and will have – on people and communities.

"He was introduced to the tourism team, saw education and training in action, went deep



"I would say to people who are thinking about leaving a gift, it's a really great opportunity to come out and see those places while you still can."

Emma Martin

Top: The late Dr Stuart Bartle and Mrs Bonnie Bartle

Bottom: The Bartle's nieces, Emma and Anthea, visiting the RFDS Broken Hill Wellbeing Place with staff Cristina Caamano and Kayelene Crossing



behind the scenes. As a beneficiary of patient transport, he knew about that service, yet had no idea about the extent of the RFDS's work – especially the education and continued innovation and in-house training."

"He was gobsmacked at the multitude of aspects of training, education that goes behind keeping our operations running. He saw our flight simulator, our critical care dummies used to train our staff and medical students. He met the people who ensure clinical areas, equipment and supplies are ready at a moments notice – the exact supplies needed to save his life on "the worst day of his life."

After the tour, Cristina will never forget his words, with tears in his eyes: "I'm just an ordinary man, I can't believe all these people work so hard behind the scenes to help so many people when they need it. When I needed to get emergency surgery, all these people were at work that day, doing what they needed to do to make sure I got where I needed to go to get the best care."

> "I wouldn't have my daughter or my granddaughter if it weren't for you." These words came from a city-based woman, whose daughter married and moved to a remote station over two hours' drive from the nearest medical clinic. Heavily pregnant, she went into labour, in an extremely remote location, and became seriously distressed, coming extremely close to death. In the station's homestead, the RFDS flight nurse fought long and hard to keep the daughter and the baby alive. "Leaving a gift for the RFDS was the least I could do. The RFDS matters to our family."

The RFDS means so much to supporters for so many reasons. From all walks of life, supporters are intricately connected to the RFDS. Supporters that live in the outback view the connection to the RFDS as an extension of their community. Every day supporters say the RFDS matters deeply to them. And they matter deeply to the RFDS. It's a meaningful relationship, a true and impactful partnership.

Listen to Vanessa Latham and Lesley Harvey talk to The Flying Doctor podcast about how we support locals through challenges of drought, loss and trauma, and how play therapy is helping kids who really need it on [Apple podcasts](#) or [Spotify](#)

→))

Annabel Peet and Bryan Wheatland from the Dubbo Support Group with the Mobile Education Unit



Partnerships enabling the RFDS to deliver something more to the community

In the past 12 months we've continued to partner with mental health, rural adversity programs and organisations to provide access to services that aren't easily available to people in the bush. We share resources and provide something better for the community. We are there, alongside each other, together," says Vanessa Latham.

"Reflecting on the past year, there's no better example of 'doing it together' than the RFDS GROW program," says Vanessa.

> A young Indigenous schoolboy stands in front of a huge shipping container turned aquaponics unit. Laden with yabbies, it's a giant fish tank that super grows produce in garden beds. He and his classmates are fully engaged and immersed in learning. They soak up new knowledge about growing fresh produce, which then connects into wider education around nutrition, and Mental Health, Alcohol and Other drugs health challenges. It also inspires. Through GROW, that young boy developed an interest and passion for food. He now has two jobs in local regional café's learning everyday about food and the service industry more broadly.

The Guiding Rural Outback Wellbeing (GROW) program is a holistic approach to building community resilience and capacity to tackle drug, alcohol and mental health challenges. It encourages students to look after their health and wellbeing, provides peer support, food systems education and builds connection to country.

And it was developed by RFDS through partnerships with the Australian Drug Foundation, Western NSW Primary Health Network, schools in Gulargambone, Gilgandra, Warren, Trangie, Nyngan, Bourke, Cobar, Broken Hill and Wilcannia and Men's sheds in Menindee and Dubbo.

"It's a preventative and early intervention, education program with economic, educational and other benefits," says Vanessa. "Principals have also seen improvements in attendance, telling us that attendance is higher on GROW days."

The GROW program is made possible thanks to a visionary multi-year philanthropic commitment from the Tenix Foundation.

Young people learn how to grow their own produce.

Above: Matt March teaching local school kids about horticulture



Primary Care Nurse Kerri Rothery and General Practitioner Dr Paul Lunney. Image courtesy of Isuzu UTE Australia



> When people think of the RFDS, they tend to think planes emblazoned in red, white, and blue. However, a significant portion of our work is done by vehicles which is why the RFDS's major national partnership with Isuzu UTE, established in 2023, is so important.

The partnership supports the delivery of essential healthcare services to rural and remote communities across Australia, through significant financial support and the provision of a fleet of Isuzu D-MAX and MU-X vehicles.

In NSW, an Isuzu D-MAX has been provided to support the towing for our Mobile Education Unit (MEU) to shows, field days and other key events, while an Isuzu MU-X is the primary health vehicle, taking our nurse and doctor to clinics at remote locations including Grawin, Hebel, Weilmoringle, Nymagee, The Marra and Enngonia.

Learn more about how [our partnership with Isuzu](#) takes us further.

Partnering to educate and upskill for ongoing impact



VRA, RFDS and NSW Ambulance simulation training

> When around 40 young GPs from remote and isolated towns in Western NSW arrived on a remote farm with RFDS medical staff, they were shocked at what they saw. A man (an actor) with a (fake) gunshot wound lay on the ground, (fake) blood everywhere, and a (toy) gun lay close by. The adrenalin starts pumping. For most of the group, their initial instinct was to run in and treat the gunshot wound. They quickly learnt the first thing to be done was secure the scene, move the gun and make sure the area was safe.

This scenario was one of many these young GPs faced on what Dr Kiri Oates refers to as “Farm Days.” Designed in partnership with the Royal Australian College of General Practitioners, the annual RFDS Farm Days cover all the spicy scenarios: snake bites, motorcycle accidents, quad bike accidents, electrocution, amputation by auger, gunshot wounds. Participants receive minimal equipment, a blood pressure monitor, some bandages, minimal amounts of medication.

“It teaches them both the complex – like how to call for help when there’s no reception – to the basics such as scene safety,” says Kiri.

“Many of these GPs work in isolated areas, where resources may be limited, so the Farm Days also give them practical management tips and tricks and provides them with insight into what life is like in remote Australia, what the RFDS does and what it brings to the table.”

As a doctor, Kiri Oates is often on the frontline retrieving patients, flying to unwell people across the vast expanse that is RFDSSE. When not retrieving, she can be found managing the emergency phone guiding a parent through treatment of an unwell child, or snake bite on a station. But it’s her special interest in education and upskilling that has led to important partnerships and programs – such as the Farm Days – which aim to improve and evolve the RFDS and the industry at large.

In the past year, on top of Farm Days, Kiri has led several other programs and courses to educate and upskill. In partnership with the School of Rural Health (Sydney University), Kiri and the other RFDS critical care doctors taught medical students about trauma and emergency medicine. She has facilitated courses to upskill medical practitioners both inside and out of the RFDS including the Advanced Life Support (ALS), which is “essentially extreme CPR,” she says. “It’s a globally recognised qualification and over the past year we have laid the foundations to potentially start running this program out of Dubbo. It potentially provides a new income stream for the RFDS, it will upskill RFDS staff, and opens up opportunities to attract workforce into remote areas,” she says.



From 2022, the University of Sydney started taking first year medical students into the Dubbo campus of the School of Rural Health. This means that students can do their whole medical degree in Dubbo and hopefully many of these students will want to stay to live and work in Western NSW. RFDS has a strong partnership with Dubbo School of Rural Health, providing doctors to regularly teach the students, as well as providing clinical placements in the emergency and primary health services.

Tackling the skills shortage is also behind the ongoing partnership with the Australian College of Rural and Remote Medicine, to register courses and jobs, enabling staff to work with the RFDS on the ground at remote clinics.

The RFDS also partners with community to build first aid capability, running courses to teach how to manage snake bites, burns and more, to upskill the community in immediate first aid management “which is really critical to the overall outcome, and what the members of community can do before the RFDS arrive,” says Kiri.

Simulation at Dubbo Hospital



“These partnerships with education at the heart, are crucial in creating impact, through raising the standards of excellence across industry and the RFDS. Our staff need to be sharp. They deal with some of the most striking trauma. It’s one thing seeing trauma in a hospital, but it’s an entirely different story when you are the first on scene. Practicing these scenarios is non-negotiable and through partnerships to deliver these courses, we give medical practitioners the opportunity to practice focussing under this pressure.”

The RFDS and its specialist skillset is a resource healthcare associations are keen to tap into. In April 2023, the NSW Operating Theatre Association hosted their annual conference at the RFDS Dubbo Base where they benefited from presentations by former Flight Nurse, now Critical Care Educator, Michael Cook and Dr Matthias Beckman, as well as an opportunity to practice advanced airway management skills and SALAD method of bronchoscopic intubation in the RFDS SIM centre.

The old adage says you cannot be what you cannot see, and it’s a saying that the RFDS takes to heart. In addition to partnering with peak bodies and other service providers, the RFDS also looks at ways to nurture the next generation to consider a career in health, aviation or engineering.

In June 2023 alone, the RFDS welcomed more than 100 girls from schools from across Western NSW for the Women in Aviation Australian Chapter’s Girls in Aviation Day at the Dubbo Visitor Experience. At the Broken Hill Base, the Sydney Flight College and 50 local high school students took a tour of the RFDS facilities and learned more about the journey to becoming a pilot.

Michael Cook leading a simulation



Peter Crossing having a chat with Herb Hemley



Our people

People join the RFDS because they connect to our mission. We invest in our people so they can thrive and connect to their purpose every day.

> Hugely respected and loved by everyone in the network, Dr Jo Ho is the kind of GP everyone wishes they had. She calls ahead of appointments, and after, especially for those in remote areas to check in and connect with them: "I'm seeing you next week, is there anything you want to flag?" or "It's been a month since we met, how is it healing." Jo exemplifies the RFDS culture and the kind of people who work at the RFDS.

Likewise, RFDS South Eastern Chief Pilot and Head of Flight Operations, Cameron Gibbs. When Cameron joined the RFDS, his first job is etched firmly in his memory. Sweltering heat and after a deluge of rain, he landed on a remote strip. Met by the local fire truck and a few 4WDs, they were towed through flooded creeks to reach a young boy who had fallen off a motorbike and was lying motionless on the creek bed. It took the better part of a day to treat the patient and get him out – during which time, Cameron stepped in where needed: providing shade, fetching medical packs, reminding everyone to put sunscreen on. When flying home, he sat with the boy's dad and supported him. It was a day which cemented in Cameron's mind that his new role at the RFDS was certainly not that of a 'typical' pilot.

In fact, working at the RFDS is not a typical experience most people can relate to. There's no one size fits all job, there's no one typical day, and there's no typical person either. The RFDS has an extraordinarily diverse range of jobs, and an equally diverse group of people.

But there is one golden thread that unites them all.

"We are people who are genuinely connected to the cause," says Jaime Lewis, Broken Hill based People Business Partner. "Connected to the RFDS purpose and connected to the communities the RFDS serves."

Across the entire mix – fly-in fly-out, those who are always remote, those located on base, and those behind the scenes – they are all connected by this core innate driver: the desire to have meaningful work. And supporting them to do this is a priority for the RFDS.

In the past year, the RFDS has supported its people to continue to deliver healthcare to remote communities, through innovations, training and thinking about its workforce and operations in new ways, providing flexibility, adaptability in roles and the way it operates.

"Our amazing and dedicated people, from those working on the ground with community, to the emergency doctors and pilots providing help on the horizon, through to the engineers and behind the scenes support staff that keep the wheels turning, they are all the lifeblood of our organisation," says Rachel Smith, Dubbo based People Business Partner.

Supporting a sustainable workforce: attracting, connecting, retaining skilled people



None of what the RFDS does is possible without the best people. They are essential to the RFDS's ability to deliver and support communities in accessing healthcare.

Ongoing education

Michael Cook, the full-time educator for RFDSSSE, runs daily simulation sessions in a SIM centre for doctors and flight nurses to practice dealing with different emergencies while delivering care in flight and generally delivering healthcare across the remote environments in which the RFDS works.

"We have a SIM centre where we run courses – such as the ALS and the CICO (Can't Incubate Can't Oxygenate), plus our week-long induction for all new staff (with a similar farm day), and other training. These are all vital to keep our team up to scratch and our teams working together," says Dr Kiri Oates.

For many towns in rural and regional NSW, the RFDS is the backbone of the community in terms of the delivery of healthcare.

"It's so important for the community to see us doing what we do. Doing courses and expanding knowledge in the local area plays a big role in providing a sense of relief for the community. It provides reassurance that the standards of excellence are high, we are reliable, and we are there in times of need, providing more equitable access to healthcare in rural and remote areas."

"Ultimately, we are partnering for better health outcomes for communities into the future," says Kiri.

> Tamlyn Gresser knew from a young age that she wanted to be a pilot for the Royal Flying Doctor Service so when she joined the organisation in January 2022, it was the realisation of a dream. Now the Senior Base Pilot for the RFDS Dubbo Base, Tamlyn leads a dedicated team of 12 that fly all over South Eastern Australia for emergency retrievals, patient transport and provision of primary health clinics.

"I did work experience at the Broken Hill base in 2009 when I was in year 11. I went away from that convinced that I wanted to work for the Flying Doctor," says Tamlyn. "I finished school then went away and got my pilot's licence. I spent a few years flying all over Australia, doing surveying, charters and freight jobs. Finally in January 2022 an opportunity came up here."

The day-to-day business of working in aeromedical industry was completely different from passenger airlines or freight transportation, Tamlyn says working at the RFDS is totally different to most jobs as a pilot. "You come in at the start of a shift and you don't know what you will be faced with that day or where you will be flying. And you're part of a team. You work with doctors and nurses, so you learn what they do, and you help where needed with loading the patients."



Co-Medical Director Emergency and Retrieval Dr Peter Brendt
Top left: Dubbo Senior Base Pilot Tamlyn Gresser

Preparing for the future workforce

In the past 12 months the RFDS has thought deeply about what it offers, what it's able to do and how it can be done. It has reviewed, reassessed, and shifted strategies across its workforce and service delivery. It has changed policies to build a flexible and well-trained health workforce. And upskilled to improve efficiency in services, and invested in innovative technologies to improve patient outcomes.

"We thought about our workforce differently. From how – and who – we attract, to how we upskill and help grow careers with the RFDS," says Rachel.

The RFDS readjusted its recruitment strategy, through a myriad of shuffling and shifting its approach such as partnering with local rural schools and tweaking its apprentice program to attract young engineers such as Harry.

"We introduced a new training program, which enables our pilots to now fly out of other bases, which they didn't do before."

"Every year the RFDS needs to recruit highly skilled, highly motivated staff to do these jobs; and train them to do what is needed," says Peter Brendt, Co-Medical Director Emergency and Retrieval for the RFDS.

For instance, an RFDS flight nurse must be 1) a registered nurse, 2) a midwife and 3) have critical care experience. It's the proverbial needle in a haystack.

"To attract more flight nurses, in the past 12 months we trialled an alternate workforce model: instead of the triple threat, we brought on board registered nurses with critical care experience, who we then support to train in midwifery," says Rachel.

> Enter Kristy, a local Broken Hill qualified and experienced critical care nurse. She'd always wanted to work for the RFDS as a flight nurse, but wasn't able to without a midwifery qualification. Through the RFDS trial she filled a major staffing gap, experienced working with the RFDS, and is studying midwifery before she will return as a fully qualified flight nurse and midwife to continue her career with the RFDS.

The re-thinking also led to new training and upskilling programs. From week-long induction courses, and an industry leading First Nations course, to cultural immersion days, and 'Farm Days' where teams face scenarios with limited equipment, the range of training and upskilling opportunities provided by the RFDS is helping its people to be ready and confident, and better understand the needs of the communities it supports.

Flight Nurse Eddie Jacob



Retrieval Medical Officer Christophe Duchatelet and Flight Nurse Zoe Boardman

These are important innovations.

They not only fill skills gaps, they also provide opportunities to grow and upskill, and ultimately ensure the best healthcare can be delivered.

> As Cory Paulson sat listening to speakers at the Lowitja Institute International Indigenous Health and Wellbeing Conference, he knew the knowledge he was gaining would be beneficial to the RFDS and how it could help to improve the health and wellbeing of Indigenous communities. Cory works with First Nations Communities and drives much of the First Nations program work across the RFDS. "In the past year I was lucky to attend numerous events: Lowitja, Suicide Prevention Forums, NSW Aboriginal mental health forum, and Western NSW Primary health network forums. They've helped me gain a deeper understanding around holistic care for Indigenous communities and this is definitely informing our future plans."

Upskilling and ongoing education has been a major focus for the RFDS. From its world class flight simulator, to launching new education programs and courses for nurses, doctors, and mental health specialists, to supporting ongoing learning for its First Nations health and wellbeing team. Upskilling and education opportunities have enabled the RFDS's people to stay up to date, better adapt to change, and confidently deliver a consistent service to those who need it most.

Cory Paulson, Manager, First Nations Health (right) and Derek Hardman, a respected Barkandji community leader



> When asked why he wanted to be an RFDS pilot, Cameron Gibbs doesn't hesitate: "Who else is going to ask you to take an \$8 million aircraft and land it in a paddock?" he joked. "Seriously though, I always wanted to fly for the Flying Doctors. We have fantastic equipment, engineers and purpose." Eighteen years later, Cameron is now Chief Pilot & Head of Flight Operations of RFDSSE section, responsible for managing flight crew, ensuring they have everything they need to do their job safely – rosters, documentation, training – and to high standards of excellence.

He leads a team that conduct human factors and non-technical skills training for our doctors, nurses, pilots, engineers, administration and operations staff, and the executive. This training focuses on what it is to be human and how it impacts how we perform in our jobs every day. Topics covered include information processing, culture, communication, teamwork, hazard awareness, error management and situational awareness. It builds significant awareness across disciplines and when possible, culminates with attendees in the flight simulator learning principles of flight and experiencing an emergency situation. "After completing this training, everyone on the team has more of an understanding of the crucial role everyone plays in delivering our service, and has more empathy for each other."

Chief Pilot Cameron Gibbs



Supporting career growth

> Danielle McKeown has grown at the RFDS – from People and Culture Project Officer to now leading Organisational Development. “The thing that stands out for me is that the RFDS gave me the opportunity to develop. This is a place where if you have an idea, or you want to contribute something that may differ from your standard role, you are encouraged and supported to do that. You are listened to. Your input is valued.”



Chris Denning in the Operations Centre

Supporting its people to grow professionally and personally is important to the RFDS.

“It’s a priority to support its people, all of its people – those delivering the service, and those behind the scenes – to have meaningful careers,” says Danielle McKeown, Organisational Development Partner.

To enable this, the People Team has developed an RFDS ‘career flightpath’ of core competencies that helps to articulate and develop the unique core capabilities of a RFDS employee or leader.

“It provides a roadmap for RFDS people to build capabilities across all roles,” says Danielle.

To further enable growth opportunities for its people, the RFDS has also adjusted team structures, launched leadership development programs, and laid the groundwork for digital transformation (automation of systems) to improve efficiencies and better support employee growth.

“Our new leadership development program for senior leaders is up and running with 10 modules covering aspects including personal effectiveness, financial acumen, building transformational culture, high performing teams,” says Danielle.

“I have found the Senior Leadership Development Program a well-rounded and comprehensive learning journey. It has enabled understanding across several elements of management and leadership at the RFDSSE, from financial acumen to having those difficult conversations. Importantly, there have been moments when I have laughed, been challenged and at times found the self-reflection confronting. I believe though, that it is only through fully engaging in the program can I grow as a leader and positively impact the organisation.”

Paula Ramien, Project and Property Manager



Cultural connections informing the future of RFDS

> Local to Menindee and descended from the Barkindji, David Doyle has always loved the bush and river. As he stands on country with 10 members of the RFDS Board and the Executive Team, his passion is clear. He immerses them in First Nations history, culture, food, bush medicine, foraging. This was the first cultural immersion day for the RFDS. Another – a cultural cruise – was held on Sydney Harbour where RFDS teams learnt about cultural landmarks, and the communities who lived there. These immersion programs will be rolled out organisation wide, for all RFDS people to experience, and gain a deeper understanding of Indigenous communities.

“These immersion days are creating an important shift in the RFDS, helping its people to have a greater understanding, a genuine empathy, and greater awareness of how we need to be engaging with Indigenous communities,” says David Doyle, who works in First Nations Health Wellbeing and Service Development for RFDS.

“Getting people onto country, connecting with culture, and understanding more deeply what a holistic approach to care for Indigenous people means, is essential if we are to achieve better health outcomes for First Nations people,” he adds.

Connecting RFDS more closely with First Nations culture is having a dramatic impact on knowledge and understanding of local Indigenous society, history and culture. Participants reported improved knowledge and understanding of local Aboriginal people, history and culture; enhanced confidence in incorporating Aboriginal perspectives into their role; and gained new skills and awareness for communication with First Nations people and organisations.

The immersion days are one part of a larger strategy for greater connection to Indigenous culture. In the past year, the Aboriginal Leadership Group’s creation of the cultural perspectives e-learning module marked another important step forward in the implementation of this strategy.

Executive leadership team and Board out at Menindee



David Doyle leading a cultural immersion

Below: Acknowledgement of Country 2023



Inspiring and supporting its people for better health outcomes

“We were the first RFDS Section to do this cultural learning course,” says David.

Developed by the RFDS’s Indigenous employees, the course includes history, policy, and language. It is now up and running organisation wide, for all employees. Over the eight months since it’s launch, the most common feedback was that people had an increased knowledge of local language and words, significant dates and of Aboriginal history.

This is one of the many ways the RFDS supports its people to strengthen relationships with First Nation’s groups, communities and leaders to better enhance the health care system and services delivered to Indigenous communities.

“We have a real impact on communities, I know it’s greater than me. This is why I do this.”

Jaimie Lewis



Sharleen Read, Gavin Drake, Matt March, David Honeysett, and Dani Chilambikunnel

It’s hard to argue the fact that the RFDS values its people. Although the challenges faced in the past year are vast, it has supported its people – new and old – by thinking differently about its workforce, flexibility, adaptability, training, upskilling, career growth pathways. It has driven efficiencies through new structures and tools, and improved connection to each other, and to First Nations culture. Through this multi-layered approach, the RFDS has paved the way to achieve the ultimate goal: improve health outcomes in remote, rural and regional communities and truly be the ‘mantle of safety’.



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Dubbo NSW 2830

Dubbo RFDS Visitor Experience

21 Judy Jakins Drive
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