



Royal Flying Doctor Service
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AirDoctor



THE OFFICIAL MAGAZINE OF THE ROYAL FLYING DOCTOR SERVICE
SOUTH AUSTRALIA & NORTHERN TERRITORY | ISSUE 277 | NOVEMBER 23

From the Chairman & Chief Executive >



PETER DE CURE AM
Chairman

TONY VAUGHAN ASM
Chief Executive

THANKS TO the enduring efforts of the entire Flying Doctor community, we continue to provide care every 10 minutes to someone in SA and the NT – an extraordinary feat.

Over the past 12 months, the RFDS has delivered more than 47,000 episodes of care to South Australians and Northern Territorians, including:

- > 9,762 aeromedical evacuations;
- > 7,442 digital health consultations;
- > 5,676 face-to-face primary health consultations;
- > 879 face-to-face mental health consultations;
- > 1,452 face-to-face oral health consultations; and
- > 1,000 patients transported by road.

As we reflect on another busy and productive year, we are forging ahead with innovations to enhance health outcomes for Australians living beyond the reach of mainstream services.

This month, we officially opened our Riverland Patient Transfer Facility – the second of its kind in SA.

Cover: Remote station owners Ash Williams and Laura McCarthy (story on page 4).

At least once a day, RFDS crews land in the Riverland region to airlift residents and tourists to Adelaide for life-saving care or specialist medical treatment, and this landmark facility will help enhance patient care during these aeromedical missions (page 6).

In the air and on the ground, the integration of the new RFDS Electronic Health Record into our operations has already enhanced the quality of medical documentation, patient handover and in-flight planning, all while affording our clinicians more valuable time to focus on the direct care needs of our patients.

In this edition, you can see how the EHR helps our crews in action, as we provide unique insight into an outback rescue, tracking our Aeromedical Retrieval team from start to finish as they airlift a young Territorian to safety (page 8).

With a commitment to providing whole-of-life care, the RFDS has been agile and innovative in our support of patients across our primary healthcare services – 2022/23 showed a 19 per cent increase in digital health consultations.

Adding to our network of Remote Area Nursing Clinics in Marree, Marla and Andamooka, RFDS SA/NT adopted delivery of primary health services for the SA communities of Innamincka and Yunta from the start of July.

We also continue to hit the road and the skies to deliver ongoing care and support, like in the NT, where our Mental Health & Wellbeing team is working with remote schools to build mental health literacy (page 12).

During 2022/23, people from all corners of the community helped our fundraising team generate \$12.1 million to help keep the Flying Doctor flying.

More than ever, we wholeheartedly value this exceptional support from our corporate partners, community fundraisers and our *Ground Crew* – Auxiliaries, Support Groups and individual donors.

Everything we do here at the RFDS starts from the ground up – and it all begins with you.

Peter de Cure
PETER DE CURE AM
Chairman

Tony Vaughan
TONY VAUGHAN ASM
Chief Executive

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The RFDS acknowledges the Traditional Owners of Country throughout Australia and recognises their continuing connection to land, waters and community. We pay our respects to them and their cultures; and to Elders past, present and emerging.



The Elders team at the partnership announcement in Jamestown, SA.



ELDERS KATHERINE branch manager Leo Neill-Ballantine knows all too well the impact the Flying Doctor has on rural, remote and regional communities.

While living and working at Tarlton Downs, a cattle station located halfway between Alice Springs and Mount Isa, Leo's then 16-year-old son, Jack, was airlifted after crushing his foot.

After spending most of his life working on remote stations, since joining Elders in 2021, Leo continues to hear stories from employees and his agricultural service clients about the RFDS.

"Our son dropped a forklift tyre on his foot and the RFDS was very quick to respond – it was comforting for my wife and myself. Once you've had that experience, you have to take your hat off to the RFDS and admire what they do," Leo said.

For our clients, particularly living in remote areas, it's such a great thing to know the RFDS is on-call, providing a service that's second to none.

— Leo Neill-Ballantine

Elders recently guaranteed its commitment to the health and wellbeing of rural and regional communities with a three-year extension of its major sponsorship of RFDS SA/NT.

First partnering with RFDS SA/NT in 2016, the Australian agribusiness icon has committed to a \$450,000 contribution over the next three years to support the continual upgrade of Flying Doctor aircraft and life-saving equipment.

In recognition of Elders' tangible support, the RFDS PC-12 aircraft VH-FXW, or 'Whiskey' as its affectionately known by Elders employees, will continue to airlift two patients a day throughout South Australia bearing the Elders brand on its fuselage.

Over the past year alone, 'Whiskey' has flown more than half a million kilometres and airlifted

more than 1,100 patients from 62 different regional and remote communities to specialist medical treatment.

"Everyone at Elders is enormously proud to be continuing our support of the RFDS. Many of our people have had their own personal experiences with the Flying Doctor and if not, they certainly know someone who does," Elders Chief Executive Mark Allison said.

"Elders and the RFDS share common goals and values in the commitment to the health, wellbeing and prosperity of those who live, work and travel in regional and remote communities – and that includes our staff, our clients and their families."

Charlie Paterson, RFDS Executive General Manager Strategy, Brand & Reputation, said the impact of Elders' continued support was highly valued and would deliver long-lasting benefits to the community.

"Supporting healthier and happier Australians no matter where they live, work or play – is at the heart of everything the Flying Doctor does," he said.

"We are proud to be associated with a strong, trusted and community-minded organisation such as Elders. Their support will go a long way to assist remote, rural and regional patients when they need it the most."



“The timeframe from my accident to being in a hospital bed was amazing – we’ve gone from the middle of the outback to the Royal Adelaide Hospital in a few hours.”

- Ash Williams

Clockwise from top: Ash at Mahanewo Station with his repaired motorbike; Ash being transferred via ute at Mahanewo Station under the close monitor of Dr Atkinson.



A close shave: Ash’s story >

After regaining consciousness, station owner Ash spotted his battered motorbike in nearby scrub. The damage to his own body remained a mystery.

AMONG THE VAST EXPANSE of Mahanewo, a remote sheep station more than 400 kilometres north of Adelaide, owner and sixth-generation farmer Ash Williams set off for a day of mustering.

With an estimated 11,000 livestock across 119,000 hectares, the Mahanewo team spend long days covering all corners of the property to gather sheep ahead of shearing season every February.

On this occasion, about 25 kilometres from the station’s homestead, an unforgiving dirt track sent Ash flying from his motorbike, knocking him unconscious.

“The next thing I remember was waking up in a daze,” he said.

“It took me a good 30 seconds to realise where I was and that I’d even been on a bike.”

Wounded and disoriented, Ash spotted his battered bike in nearby scrub.

As the adrenaline and shock waned, the pain came. Struggling for breath, he slumped under a nearby tree.

“I went to pick the bike up and I physically couldn’t move it,” he said.

“My back, chest... everything was hurting by then.”

Ash realised he was alone when he woke up. He had started the day with his station manager, before they had headed off on different tracks.

“Karl had worked out that I was no longer behind him, so he called me on the radio,” he said.

“I went to answer and that’s when I realised I couldn’t speak.”

With his only lifeline a faint grunt for help through his UHF radio, Karl located Ash and carefully loaded him into a ute bound for the homestead.

“The 25-kilometre trip on the dirt was torturous,” Ash said.

“It was a better alternative to the back of a motorbike, but the pain had well and truly kicked in.”

Back at the homestead, as station staff tried to comfort Ash in excruciating pain, an emergency call to the RFDS was made.

An Aeromedical Retrieval team comprising a pilot, flight nurse and two doctors departed the RFDS Port Augusta Base.

Still uncertain about the extent of his injuries, Ash couldn’t help but wonder how bad things were.

But before long, an unmistakable sound cut through the angst – an RFDS PC-12 aircraft echoing above.

“When I heard the RFDS plane, I remember feeling overwhelming gratitude, but also guilt that they had come all this way for me,” Ash said.

“Once they arrived it was a sense of relief. It put my mind at rest knowing there wasn’t anything they couldn’t handle.”

On arrival at Mahanewo, the RFDS team was driven from the nearby dirt airstrip to the homestead, where they conducted a head-to-toe assessment on Ash.

Lead doctor, RFDS SA/NT Clinical Director Retrieval Services Dr Merv Atkinson identified suspected significant neck and spinal injuries that needed urgent treatment in Adelaide.

Without the RFDS team’s expert care, Ash could have been paralysed or had a lung collapse.

“When we arrived, Ash was unable to move the top half of his body due to pain and was taking rapid shallow breaths,” Dr Atkinson said.

“We had to get some good pain relief into him so he could be safely immobilised on a stretcher ready for flight. This involved carefully placing him on a vacuum mattress, which hugs the body and prevents the movement of broken bones.

“We had to get Ash in the stretcher on the back of the ute, securing it as best we could, and carefully drive back to the aircraft.”

Ash was safely transferred from Mahanewo Station to the Royal Adelaide Hospital (RAH), where he was taken straight into the emergency department for scans and treatment.

Ash hates to think what the alternative would have been if it wasn’t for the Flying Doctor and the team at the RAH.

“It would’ve been horrific to have to drive 200 kilometres to Port Augusta for medical help,” Ash said.

“To me, the RFDS is providing a service to the outback, that without, would cost lives and a lot of suffering.”

Ready, set, Riverland >

The RFDS joined SA's Riverland community at Renmark Airport to mark the official opening of the region's first Patient Transfer Facility.



Clockwise from left: SA Ambulance Service's Kieran Johnson and Paula Parker with the RFDS's Rebecca McDonald and Dustin Curtis; The RFDS Riverland Support Group; RFDS SA/NT Chairman Peter de Cure AM and RFDS Riverland Support Group President Alan Eckermann; Graham Pitts and Shirley West attended the event on behalf of their late brother John Pitts' contributions.



MORE THAN 100 members of the local community and business representatives, all of whom contributed to the project through monetary or in-kind donations, attended the official opening of the Riverland Patient Transfer Facility (PTF) in October.

The new PTF enables RFDS and SA Ambulance Service (SAAS) crews to treat and stabilise patients in a climate-controlled environment, which is especially important for night transfers and on days when temperatures are in the 40s.

"RFDS crews land in the Riverland at least once a day, airlifting locals who need life-saving care or specialist medical treatment. We do this 24/7, through all light and weather conditions," RFDS SA/NT Chairman Peter de Cure AM said.

"Currently, local patients requiring stabilisation are cared for outside, on the tarmac. Our new facility will enable RFDS, SAAS and SAAS MedSTAR crews to treat more than 600 patients each year in a safe and secure setting.

"With the Flying Doctor helping hundreds of people in the Riverland each year, it is likely that community members will have a friend, colleague or family

member, if not themselves, who will directly benefit from this landmark community asset for many years to come.

"This dedicated facility in the Riverland, for the Riverland, will set new standards in patient care and operational response times for critical patients, as well as improve comfort levels for all patients, crews and service-delivery partners."

The RFDS Riverland Patient Transfer Facility will feature:

- > a climate-controlled indoor environment for the clinical handover of patients between RFDS and SAAS crews;
- > a stabilisation bay for retrieval teams to manage deteriorating patients prior to flight;
- > a spacious floorplan to accommodate multiple patients and crews at the same time;
- > a secure undercover ambulance patient drop-off area;
- > a standby light vehicle for transport of retrieval teams to local hospitals; and
- > private rest areas for patients and crews.

The \$650,000 modern facility was fully funded by the RFDS through community fundraising, new and existing donors, and the support of the local business community.

The RFDS Riverland Support Group, one of 24 RFDS volunteer groups across the state, was instrumental in progressing the fundraising campaign.

The Group has been ably supported by local organisations, including the Lions Clubs of Berri, Renmark, Barmera, Waikerie and the Lions Foundation, which funded the purchase of a standby light vehicle – permanently based at the PTF for the transport of RFDS and SAAS MedSTAR retrieval teams to and from local Riverland hospitals.

The land for the PTF is owned by Renmark Paringa Council, which has committed ongoing in-kind support through a multi-year lease and covering costs such as council rates and utilities.

Operational from October 2023, the Riverland PTF will immediately assist the RFDS in caring for patients and saving lives.

How it will impact our patients and crews >



"We're getting people to definitive care as quickly as possible, so just to be able to have a facility to make that a much more comfortable process for the patients, and us clinically, is incredibly valuable."

Rebecca MacDonald
Flight Nurse, RFDS



"This facility means streamlined access to tertiary services for those patients who have a specialist or urgent need that can't be met in the Riverland. It means rapid access to care. It means the right care as soon as possible."

Wayne Champion
CEO, Riverland Mallee Coorong LHN



"In inclement weather, giving a detailed clinical handover to the RFDS is not necessarily as robust as it could be, as we're trying to beat a rain cloud, tackle noisy wind or it's minus five degrees... this is going to solve all of those. This is a game changer."

Kieran Johnson
Riverland Clinical Team Leader,
SA Ambulance Service



"It's a really good opportunity to have a such a great facility here to look after our patients. I know someone who was flown by the RFDS — without them he probably wouldn't have made it. It's massively important to the community for that reason."

Robbie Bonner
President, Renmark Rovers Football Club

Behind the scenes >

Follow the Flying Doctor on an outback mission to get young patient Tyler to safety and care.



1. Emergency tasking

The RFDS Alice Springs Base is alerted of an accident at a cattle station. The local remote clinic provides a run-down – young station worker Tyler has crushed his arm in an accident and it's time-critical.



2. Patient preparation

On-duty Flight Nurse Sophie Stibbard analyses the patient notes using the RFDS Electronic Health Record (EHR)¹ while packing the medication and equipment. Sophie needs to consider all possible scenarios when packing for the task.



3. Aircraft check

Pilot Duke Dingley conducts an aircraft check, from nose to tail – a standard safety protocol prior to the first shift of the day for any RFDS aircraft.

4. Loading aircraft

Sophie and Duke load the aircraft ready for takeoff no more than 45 minutes after receiving the initial call.

5. In-flight planning

En route to the patient, Sophie uses the EHR to collect and gather further information as it is made available by the clinic and discusses an on-ground action plan with Duke.

6. Patient handover

Tyler is driven 10 minutes from the remote clinic to the airstrip where he is placed under the care of the RFDS. On the ground, Sophie assesses Tyler's arm injury, focusing on circulation to his hand, while also conducting neurovascular observations². Due to the nature of Tyler's injury, time is of the essence, so the RFDS team transfers onto the aircraft as quickly as possible.



7. In-flight care

Sophie administers and monitors Tyler's pain medication and comfort levels to ensure his condition doesn't deteriorate during flight, inputting further patient notes via the EHR to provide awaiting ambulance crews and hospital staff with as much prior information as possible.



8. Patient handover

The crew returns to RFDS Alice Springs Base, where Tyler is handed over to St John Ambulance NT on the apron³ and immediately transported to Alice Springs Hospital for further treatment.



Scan to watch the video >

1. A web-based application that serves as a 'digital medical bag' for all patients. 2. The components of the neurovascular assessment include pulses, capillary refill, skin colour, temperature, sensation, and motor function. Assessment of neurovascular status is essential for the early recognition of symptoms that can lead to disability, loss of limb or fatality. 3. The area of an airport where aircraft are parked, unloaded or loaded, refueled, boarded, or maintained.

"I don't know if it's shattered or broken, but I'm flying with the RFDS – a great mob and good for looking after me."

- Station worker Tyler mid-flight with the RFDS to Alice Springs



Yarning with the 'Flying Doctor mob' >

"WHAT DO YOU THINK if I talk to that Flying Doctor mob? Do you think you'd be okay to have yarn with them?"

These are the words of Hannah Case, a school counsellor who lives and works full-time in the Aboriginal community of Willowra in the Central Desert, where she has been the sole mental health practitioner for several years.

Historically, remote communities like Willowra, located on Warpiri Country more than 400 kilometres north of Alice Springs, have had little to no access to mental health outreach services.

"Willowra has anywhere between 400 to 500 people based out here and our average numbers at the school are about 30 students a day," Ms Case said.

"Willowra has a strong sense of community because it's quite small, but it's also really isolated and we don't have access to a lot of services out here, particularly around mental health for young people.

"Up until November last year, we didn't have mobile phone reception, so telehealth wasn't an option and even then, young people don't have access to phone credit to do online counselling."

As a silent mental health crisis continues its deepening hold in the remote heartlands of Australia, the RFDS is trying to stop it in its tracks.

Every week, the RFDS Mental Health & Wellbeing team out of Alice Springs hits the road to visit Central Desert communities, offering one-on-one support, running group activities and spreading awareness in aims to tackle the unfolding mental health crisis.

Today, the Flying Doctor team visits Willowra regularly, staying in community for days at a time.

Building on the school's established wellbeing programs, the team has been developing relationships in community over the last 12 months with teachers, families and students of all ages.

"We reached out to the Flying Doctor when we had some increasing concerns for young people in community around their mental health and how they were managing that," Ms Case said.

"Prior to the Flying Doctor coming out, we didn't have any mental health resources other than myself out in community. As one person servicing a whole community, there's only so much you can do, but when you have a team out here you can reach, access and support more people.

"We do 'nights in' for our senior students, where we talk about mental health, relationships and personal safety, as well as one-on-one counselling or small groups sessions with the kids around behaviour management, emotional regulation, and recognising feelings."

It is no secret the mental health landscape in remote Australia is bleak.

Those living in very remote communities of the country have far shorter lives than city-dwellers and are more than twice as likely to die from suicide and other preventable illnesses, according to the Australian Institute of Health and Welfare.

As a young person, the situation is worse. In the last 10 years, 15- to 24-year-olds have had the greatest increase in suicide rates. It has been understood for several decades that there is a 'ripple effect' in young people, in which suicide tends to appear in clusters of young adults who share social networks.

When it comes to tackling the stigma associated with reaching out for help, RFDS Mental Health Clinician Hannah West said working with schools to overcome 'shame', a deeply embedded cultural construct in Aboriginal communities, is the ideal setting to start.

In remote communities especially, mental health and wellbeing is so much more than just having a sit-down counselling session. When we visit community, we might have a yarn, go for a walk, or just run around and have fun.

— Hannah West

"It's a privilege to work with kids from such a young age and begin building their knowledge of their mental health and wellbeing in a community where there is a such strong connection to culture and where many wellbeing practices are already being shared."

Ms West said connecting with the school had opened opportunities for broader mental health consultations with community members and those employed in the community, such as the school staff themselves.

"Living remotely exacerbates mental health challenges that already exist, and it can create new ones as well," Ms West said.

"When we're able to support the professionals who come out to live in community and have such important roles in the lives and the wellbeing of so many community members, the flow-on effect means we're helping so many more people than just the individual we're working with."

"Willowra is a special community, but also a community that's experienced a lot of hardships and challenges. Being able to walk into community and be recognised as part of a service that offers so much to so many people is a real privilege."

For Ms Case and the local school staff, it's been fulfilling to see students become so willing to engage with the RFDS team and begin opening up about their wellbeing.

"When it comes to mental health in Aboriginal communities, it's really important to have cultural safety," Ms Case said.

"Aboriginal people have a lot of strength and resilience they can draw on through spiritual connections, elders, ancestors and knowledge that has been passed down through generations.

"For the clinical aspect of mental health support to be effective, it needs to be understanding of these different links.

"Out in community, it can always take a while to build relationships, particular with a new service, but with the RFDS, the young people are so willing to engage.

"You can say to a young person, 'I'm a bit worried about you, what do you think if I talk to that Flying Doctor mob? Do you think you'd be okay to have yarn with them?' and they're saying, 'Yes' because they're feeling like it's a culturally safe service."



Scan to watch the video >



From left to right: RFDS Mental Health Clinician Hannah West with school students Leshontay and Tracey; Building trust, familiarity and relationships through a game of basketball; RFDS Clinical Psychologist Alicia Van Dartel with school student Rowena; Willowra School Counsellor Hannah Case.



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Exercise your mind >



Keeping healthy involves caring for your body, but as importantly, your mind!

How many words of four letters or more can you make from these letters? In making a word, each letter may be used only once, and the centre letter must be included. No slang, foreign words, hyphens, apostrophes or plurals ending in ‘s’.



TARGET: Good - 8, Excellent - 12, Genius - 18+

TARGET: Good - 12, Excellent - 15, Genius - 20+



ANSWERS:
1. Emerge, EMERGENCE, Emery, Emery, Energy, Eyer, Gene, Genre, Germ, Green, Grey, Mercy, Mere, Merge, Neem, Regency, Renege, Yermen.
2. Elevate, Evil, Lait, Late, Leer, Live, Liar, Live, Real, Relive, Retile, Retrial, RETRIEVAL, Reveal, Revile, Trailer, Trail, Trivial, Veil, Vial



Oceans to Outback >

This October, the Flying Doctor once again challenged people across the country to walk, run or ride and raise funds for the service. Together over the month-long adventure:

 16,000+ participants  1 million km+ logged  \$3 million+ raised

Meet our participants >



Grace King
Eyre Peninsula, SA

"In 2011, at just 15 years old, a motor vehicle accident left me with a broken neck, a traumatic brain injury, extreme blood loss, and a severely shattered left arm. Without the RFDS, I might have lost my arm altogether or might not even be here today. I'll forever be indebted to them."



Nathan Mitchell
Alice Springs, NT

"My mum was flown from Alice Springs to Adelaide at 25 weeks pregnant with me. I was born at the Women's and Children's Hospital – 770 grams at 28 weeks. The only means of being transported was by the RFDS – if it wasn't for this great organisation, I would not be with us today. This is just one of the many reasons I chose to participate in the fundraiser."



Stacey Natar
Adelaide, SA

"Our little Reija celebrated her 1st birthday last month – a moment we would never have experienced if it had not been for access to RFDS. The skills, care and dedication by onboard medical staff kept her alive long enough to receive emergency life-saving heart surgery at 23 days. We can only hope our efforts and funds raised can help in any way possible to save another teeny newborn just like our gorgeous Reija."



Wardle Co Real Estate
Yorke Peninsula, SA

"For us, supporting this essential service is not just about philanthropy; it's personal. One of our own valued team members has relied on the Flying Doctor not once, but twice, for life-saving treatment. Their experiences are a powerful testament to the life-changing impact this service has on individuals and their families."



Raising funds from cow corner >

AN OUTBACK CRICKET tournament saw ten teams made up of workers from remote stations and the agricultural industry gather at Avon Downs Station in the NT to raise funds for the RFDS.

Members from the RFDS Mental Health & Wellbeing team represented the Flying Doctor, even hitting a couple of sixes along the way, with the event raising around \$50,000 through a raffle and auction.



Swinging in the wild >

THE BIENNIAL North Moolooloo Golf Classic, hosted at North Moolooloo Station, 430 kilometres north of Adelaide, attracts Australians from far and wide.

In October this year, around 150 participants competed for the coveted trophy, battling the dust, wind, flies, graded fairways, unforgiving rough and tricky greens.

Thanks to the excellent organisation and hospitality of the Ferguson family, over the past three decades, the Golf Classic has raised more than \$200,000 for the Flying Doctor.



Double the difference >

RFDS SUPPORT GROUPS and Auxiliaries have gone above and beyond over the last 12 months to generate \$800,000, through some incredible community fundraising events and activities.

The RFDS Kingston & District Support Group and Port Pirie & District Support Group are prime examples of these efforts, doubling their annual fundraising tallies to \$40,000 and \$20,000 respectively.



Soiree of support >

A 'MUSICAL SOIREE' hosted by the RFDS Clare Support Group was a huge success with over 160 guests enjoying music from Adelaide 12-piece band, Blow.

With a wine wall, auctions and a cocktail bar, the event raised more than \$11,000 for the Flying Doctor.



Fundraise for the RFDS >
Find out how you can get involved.



There's more than one red belly in the sky this Christmas.



Purchase your RFDS Christmas Cards, send
a message to our crews, or simply donate.
Scan the QR or call 1800 813 318.