



  
*CareFlight*

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Annual Report **2008**



## Our vision

is to be the world leader in rapid response critical care

## Our mission

is to save lives, speed recovery and serve the community by providing the highest standard of rapid response critical care with team dedication to safety, education, innovation and sustainability



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## A message from NRMA Insurance and NRMA Motoring & Services

NRMA Insurance and NRMA Motoring & Services have been part of CareFlight's journey for the past 18 years. During this time NRMA CareFlight has rescued and saved the lives of thousands of people, many of whom have been road crash victims.

We share a common goal with CareFlight to try and prevent the risk of road crashes occurring, as well as helping people recover and move on with their lives after an injury.

One of the highlights of our partnership this year was to see the expansion of CareFlight's world-first Head Injury Retrieval Trial (HIRT) to the Central Coast, ensuring head injury patients now receive immediate care from specialist CareFlight doctors. The trial has been funded by NRMA Insurance since 2004.

NRMA branch employees continued their support of CareFlight through local fundraising activities that over the past year raised more than \$70,000.

We'd like to acknowledge and thank the members of the CareFlight team for their tireless work and their commitment to our community over the past year.

**Gary Dransfield**  
Acting CEO  
NRMA Insurance

**Tony Stuart**  
Group CEO  
NRMA Motoring & Services

## A message from the Motor Accidents Authority (MAA)

The MAA is proud to be a supporter of NRMA CareFlight. The MAA recognises that a dedicated rapid response head injury retrieval service is likely to result in improved and faster recovery for severely head-injured patients, and bring flow-on community and economic benefits.

Being involved in research with the potential to not only save lives but significantly reduce the long term

impact of injury is an important aspect of the MAA's role. In December 2007 we signed an agreement committing \$7million to fund the expansion of NRMA CareFlight's Head Injury Retrieval Trial.

The MAA values the vital role NRMA CareFlight plays in bringing specialist medical care to critically injured patients, many of whom have been injured in motor vehicle accidents.

The MAA supervises the Compulsory Third Party (CTP) or 'Greenslips' Scheme for all motor vehicles registered in NSW and works to provide a scheme that is affordable, fair and accessible and minimises the impact of motor vehicle accidents. For more information visit [www.maa.nsw.gov.au](http://www.maa.nsw.gov.au).

**David Bowen**  
General Manager  
NSW Motor Accidents Authority



The NRMA CareFlight team retrieves a patient who sustained critical injuries in a car crash at Linden.

# From the Chairman and CEO

## Organisational objective and principal activity

Despite the transformation of NRMA CareFlight over the last year, the organisational objective of the Company remains unchanged:

"To save lives, speed recovery and serve the community by providing the highest standard of rapid response critical care with team dedication to safety, education, innovation and sustainability".

In order to focus each part of the organisation on its specific purpose, a unique objective has been developed for each service delivery unit:

- Head Injury Retrieval Trial (HIRT) / Helicopter Emergency Medical Service (HEMS): Fully integrated aero-medical service, focused on rapid response critical care, provided as a service to the community and delivered in partnership with the Ambulance Service of NSW (ASNSW).
- Medical Services: Recruitment, training, management and development of a highly specialised medical workforce under contract to ASNSW and other customers.
- Commercial: To be the largest provider of critical care air ambulance services in Australasia, in order to leverage NRMA CareFlight's capabilities and resources and maximise the surplus that can be applied to our charitable purpose.

Consistent with this organisational objective, the principal activity of the Company is the provision of aero-medical services. ASNSW is NRMA CareFlight's largest customer of both HIRT/HEMS and Medical Services.



Left: Chairman  
Dr Andrew Refshauge  
Right: CEO Derek  
Colenbrander

In December 2007 Dr Andrew Refshauge joined the Board and was appointed Chairman of NRMA CareFlight. Andrew was Deputy Premier of New South Wales from 1995 to 2005 and during his time in office also held the Health portfolio for a number of years. He brings a medical background, a deep knowledge of public healthcare issues and immense political experience to his new role as Chairman of the organisation.

## How NRMA CareFlight meets its objectives

- Highest standard of service**
- Best practice
  - Specialised medical staff
  - Highly skilled aviation staff
  - Staff trained in emergency retrieval

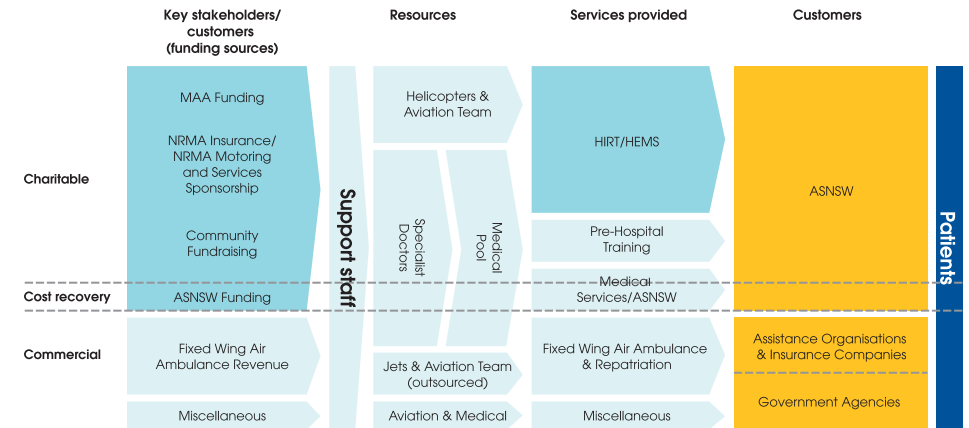
- Sustainability**
- Sustainability in order to continue to serve the community
  - Need for diverse income streams
  - Minimise single customer reliance



- Rapid response critical care**
- HIRT response times approximately 15 minutes on average to Sydney metropolitan area
  - Other air ambulance retrieval services in accordance with customer response time requirements

- Dedicated team**
- Single purpose focus on pre-hospital critical care
  - Small agile team
  - Safety focus
  - Education focus
  - Innovation focus

## How NRMA CareFlight funds and resources its operations



## The year in review

### Organisational

Highlights of our year were:

- A number of extraordinary medical missions, in which NRMA CareFlight medical teams achieved near-miraculous outcomes. Stand-out examples were the retrieval of well-known Sydney businessman Richard Longes from an horrific car crash and the resuscitation of toddler Joseph English after a near-drowning.
- The high-profile aero-medical evacuation by CareFlight Air Ambulance of critically injured East Timorese President Jose Ramos-Horta from Dili to Darwin following an assassination attempt.
- Execution of a seven-year contract with the Ambulance Service of NSW for the provision of NRMA CareFlight doctors to the medical retrieval system. Under this contract NRMA CareFlight supplies all the doctors on rostered duty at the Orange base and approximately half the retrieval doctors at the Bankstown base.
- Execution of a seven-year contract with the Motor Accidents Authority

of New South Wales (MAA), pursuant to which the MAA has committed funding of \$1million per annum to NRMA CareFlight over the life of the contract.

- Expansion of the HIRT area of operations to the Central Coast.
- Approval from the Civil Aviation Safety Authority (CASA) for NRMA CareFlight to fly night operations using advanced NVG (night vision goggles) technology.
- Planning and establishment of a new fixed wing air ambulance base in Perth in partnership with

CareFlight Queensland, Pel-Air Aviation and Ramsay Health Care. This brings to four the number of bases in the CareFlight Air Ambulance network: Sydney, Coolangatta, Darwin and Perth, with a fifth base likely to be opened in Townsville within the next year.

- Execution of an agreement to purchase the shares of Shadowstone Aviation Pty Ltd, the company which owns the BK 117 helicopter. NRMA CareFlight has been leasing this helicopter from Shadowstone Aviation for the past five years.

We thank Ian Badham for his services as Chairman of NRMA CareFlight from 2004 until 2007. During this period the organisation not only had the benefit of Ian's good counsel, but was also able to draw on knowledge and experience accumulated over 35 years in the aero-medical industry. Although Ian has retired from the role of Chairman, he remains active in the organisation as an Executive Director, with responsibility for media management and a key role in community engagement.



### Operational

During the year we experienced significant growth across all sectors of our operations.

### Financial position

We ended the year with a surplus of \$983,509. This is a substantial improvement on last year's performance which was affected by tender-related expenses.

Overall the organisation is in good financial shape with diverse, sustainable income streams. Our fundraising operation is as robust as ever, continuing the net surplus upward trend of recent years.

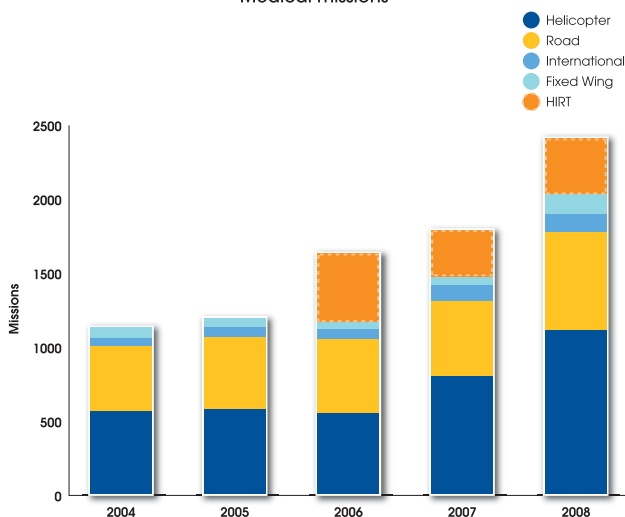
### The year ahead

We expect continued growth in demand for our services in the year ahead, for a combination of reasons:

- The increasing pressure placed on the healthcare system by an aging population;
- The centralisation of advanced health care facilities, resources and technology in the major urban teaching hospitals, and the consequent need to move patients from rural and regional Australia to Sydney (and other state capital cities) for critical care treatment;
- In the international air ambulance arena, the growing expectation by Australians working or travelling in South East Asia or the South West Pacific that they will be repatriated to Australia for critical care medical treatment, in preference to being treated in local hospitals.

Organisationally, we are exploring the feasibility of greater integration with other not-for-profit aero-medical providers. We already co-operate closely in a range of activities, and there is a compelling case for greater integration. The form and extent of the integration will emerge over the year ahead.

### Medical missions



HIRT missions are not directly comparable with other missions because a significant proportion does not result in patient transfer/treatment.

### Thank you

We would like to acknowledge and thank the following in particular for their contribution to NRMA CareFlight over the past year:

- NRMA Insurance and NRMA Motoring & Services for their continuing support, contributing far in excess of their contractual commitment to NRMA CareFlight under our sponsorship arrangement;
- The MAA for its seven year commitment to NRMA CareFlight, and to MAA nominee Director David Bowen for his key role in delivering this commitment.

NRMA CareFlight's strength comes from its exceptionally talented and dedicated staff, all of whom contribute to the success of the organisation, and all of whom we thank for their services this year.

As a charitable, not-for-profit organisation, no Annual Report would be complete without an acknowledgement to our hundreds of thousands of supporters in business and the community, whose steady support over many years has enabled NRMA CareFlight to deliver on our mission:

*“to save lives, speed recovery and serve the community”*

In words we convey our profound thanks and appreciation. By our actions we seek to demonstrate that we are worthy of your support.

**Dr Andrew Refshauge**  
Chairman

**Derek Colenbrander**  
Chief Executive Officer

## Medical

The past year has seen great change to CareFlight's medical operations both within and outside New South Wales.

### Medical contract

May 2007 saw the commencement of the new Medical Services Agreement with the Ambulance Service of NSW. For the first time in its history, NRMA CareFlight has certainty in relation to our medical service provision to the people of NSW. Now anchored on a firm contractual foundation, NRMA CareFlight continues to provide doctors to the Ambulance Service for both pre-hospital and inter-hospital missions. These critical care specialists respond by helicopter, fixed wing aircraft and road vehicles from the Bankstown and Orange helicopter bases. In the first year of our new contract, NRMA CareFlight is proud to have exceeded all performance benchmarks set by the Ambulance Service, our key customer.



Left: Medical Director Dr Alan Garner  
Right: Director of Medical Education and Disaster Planning Dr Ken Harrison

### HIRT

The Head Injury Retrieval Trial has now been running for three years. In late 2007 the NSW Ministers for Health and the Central Coast jointly announced an expansion of HIRT services to the Central Coast as far north as Wyong.

Outside the parameters of the trial, HIRT has been responding to

severe paediatric trauma since its commencement in May 2005. HIRT's role as the first responder for all severe paediatric trauma for the Sydney region was endorsed by the Ambulance Service in early 2008 with the development of a new operating procedure allowing the Ambulance Service to directly task the HIRT helicopter team to paediatric cases



Right: NSW Ministers Reba Meagher and John Della Bosca with NRMA CareFlight crew Peter Bittner, Steve Hine, David Gardiner and Dr Alan Garner at the Central Coast HIRT expansion launch.

## Bicycle crash

Thirteen-year-old Tamika was riding her bicycle down a grass slope at the edge of an oval in Moorebank when her wheel struck a bump and she was catapulted over the handlebars of the bike, landing on her head. She was not wearing a helmet at the time.

The '000' call came in at 6.25pm, and by 6.34pm, NRMA CareFlight was airborne. On board the helicopter were pilot Ken Vote, aircrewman David Mann, Dr Alan Garner and paramedic Peter Bittner. The helicopter landed on the oval three minutes later.

Tamika was unconscious with a GCS of 7. (The Glasgow Coma Scale is a neurological scale which aims to record the conscious state of a person. It has a range of 3-15, with 3 indicating deep unconsciousness.) She showed lateralising signs (restrictions to one side of the body) and her right pupil was fixed and dilated, all indications of head injury. The CareFlight medical team sedated and intubated her, and she was placed on a ventilator to control her breathing. She was flown to Westmead Children's Hospital under full intensive care where the trauma team, alerted by the crew, was waiting for her.

Tamika's CT scan showed intraventricular blood and considerable oedema (swelling). She was rushed into surgery for insertion of an external ventricular drain for treatment of severe brain injury, and she remained on a ventilator in intensive care for 15 days.

Five weeks later Tamika was discharged from hospital, and has since made a good recovery.



Registrars practise pre-hospital skills on a patient simulator in a bush scenario.

(the previous agreement allowed the Ambulance Service to directly task HIRT only in a disaster situation). This change has been strongly supported by the two children's hospitals in Sydney which had already noted a significant reduction in arrival time for severely injured children since commencement of HIRT. The combination of pre-hospital interventions by specialist doctors and paramedics with rapid helicopter transport means that severely injured children can now be taken directly to the hospitals best equipped to deal with their specific needs.

### CareFlight Air Ambulance

Jet-based medical services from our Darwin base have now been in operation for more than a year. The most notable case to date was the evacuation from Dili to Darwin of East Timorese President Jose Ramos Horta following an assassination attempt. Doctors from the Darwin base continue to rotate, principally from Sydney. Nursing staff and the Darwin base manager are resident in Darwin. Operations have also recently commenced from our new Perth base with the first mission being the transfer of an Australian man with multiple injuries from Bali to Perth.

Maintaining training and governance over such distances has created new

challenges for our Director of Medical Education, Dr Ken Harrison, who flies between bases delivering training to doctors and nurses.

### Education and training

Planning is now well advanced for the introduction of the Post Graduate Certificate in Aero-medical Retrieval Medicine, a joint project between James Cook University and CareFlight NSW and CareFlight Queensland. The first modules are to be taught at the CareFlight Queensland Coolangatta base in July 2008, and the following modules at our Sydney base in January 2009.

We have increased the number of Pre-Hospital Trauma Courses conducted in Sydney each year to four in order to meet the demand for the course. The Ambulance Service is now sending all their doctors to attend the CareFlight course.

Medical training via high fidelity simulation (analogous to a flight simulator for pilots and aircrewmen) received a big boost this year with the acquisition of a high-end patient simulator which is able to mimic many normal and pathological patient states and which can respond to the treatment provided by the doctors and nurses. As with pilot simulator

training, this allows the medical teams to practise unusual and difficult scenarios without risk to patients or crews. It also teaches and reinforces the critical skills of leadership and teamwork in crisis situations.

A component of our doctor aviation training is conducted in the CareFlight winch simulator (a full scale mock-up of a helicopter interior used for rescue hoist training). The combination of patient simulator and cabin mock-up creates a very life-like training environment for medical crews.

During the year a research project on the US Coast Guard Rescue Basket's effect on respiratory function was completed by a CareFlight registrar, Dr David Murphy. The study confirmed that the Coast Guard Rescue Basket is

likely to be the best way to hoist rescue a patient with respiratory distress. The study is currently being prepared for publication and it will also be presented by CareFlight's aircrewmen at international hoist users conferences in the coming year.

### Finally

The changes over the past year have allowed us to focus on our core strengths in medical retrieval, training, innovation and research. We are fortunate to have a stable body of dedicated and experienced consultants who strive to not only make a difference to the patients they treat, but to lead the way in clinical training and ground-breaking research.

**Dr Alan Garner OAM, MB, BS, FACEM, MSc  
Medical Director**

“I'm alive today because of the rapidity of the response and the care I received by all concerned.”



Above: Dr Rashford stabilises Mr Longes in the ambulance before he is flown to hospital. Top Right: Richard Longes, fully recovered, meets Dr Rashford at the CareFlight base.

## Car crash

One minute Richard Longes was enjoying a Saturday afternoon drive at Palm Beach, and the next he was trapped in the mangled wreckage of his car after colliding head-on with a sedan.

The NRMA CareFlight crew of pilot Ken Vote, aircrewman Scott Chaney, Dr Steve Rashford and paramedic Tim O'Callaghan responded to the call reporting the crash. The helicopter landed on the beachfront where police were waiting to transport the medical team to the crash scene.

When they arrived, Ambulance Service and Fire Brigade officers were in the process of extricating Mr Longes from the wreckage. Mr Longes was suffering acute pain in his chest and hip, which was fractured. His condition began to deteriorate as he struggled to breathe: his chest and neck swelled, and it became apparent that he had a punctured lung. A cannula was inserted to decompress his chest, but he continued to deteriorate as he suffered tension pneumothorax (a complete collapse of the lung). Dr Rashford then inserted a chest drain to allow the trapped air to escape and the lungs to reinflate. The patient's condition stabilised sufficiently for him to be transported to the helicopter.

He was flown to Royal North Shore hospital where he underwent major heart and neck surgery. He has subsequently made a full recovery.

Mr Longes owes his life to the combined efforts of ambulance officers, NRMA CareFlight crew and surgical and intensive care teams. He said of their teamwork: "I'm alive today because of the rapidity of the response and the care I received by all concerned."

# Community Support

Overall, it was a good year for CareFlight Fundraising! The positive financial results reflect the strong support of the community, and we look to the future with confidence.

The Fundraising team continued to improve our donor and supporter contact and recruitment systems and to address less successful income streams by either overhauling or discontinuing them.

### The Postman rings twice

Direct Mail was again a stand-out fundraising performer this year. Our wonderful regular supporters continued to recognise the life-saving work of CareFlight through their donations, although it was more difficult to attract new supporters because many people in NSW were under the misapprehension that CareFlight was no longer operating.

Our campaigns continued to feature ex-patients of CareFlight, and both the Christmas and Tax direct mail appeals broke all previous records with our regular supporters donating twice

as much as just three years ago. We thank them for their generosity and their loyalty.

### Corporate relations

Corporate income declined for two reasons. The first was that, like many state-based charities, we lost corporate support to charities seen as national. Secondly, there was a fall in corporate support in the Central West following the loss of the helicopter tender, despite our continuing to provide the region's retrieval doctors under contract to Ambulance Service from the helicopter base at Orange.

However, we are grateful to the many organisations that maintained their support for CareFlight. This support contributed to many new CareFlight initiatives to further benefit the community. Again, we are particularly grateful to our Sponsor, NRMA



Fundraising Director Paul Freeman

Insurance and NRMA Motoring & Services. Their support at Head Office and branch level continues to be invaluable.

### Pennies from heaven

Fundraising changed its approach to bequests over the last 12 months and had one of the strongest years on record for bequest revenue, with \$320,000 from 15 bequests.

The new Relationships Officer met with most of the generous people who have committed to leaving a bequest to CareFlight in their will, and updated them on CareFlight developments. This approach resulted in an increase of 15% in our known bequestor supporter base.

CareFlight also participated in the "Include a Charity" program, a joint initiative launched over the last 12 months by Australian charities. The campaign encourages people to leave a bequest to their charity of choice, after providing for their families.

### Top donors

Over the past year, Relationships Manager Trent Osborn visited most of our top financial supporters. The focus

of each visit was to update supporters on CareFlight's development over the previous 12 months and to make them aware of some of the important projects which they helped to fund. Supporters were also given the opportunity to visit our base and meet our medical and aviation teams in person.

Our top supporters provided wonderful support during the past 12 months, resulting in a 40% increase in this income stream. Specific projects which they funded included night vision goggles, engineering refurbishment, water rescue basket and doctor training.

### CareFlight sales up in a Bear market

Despite some jitters in the economy towards the end of the year, our supporters continued to buy CareFlight Bears and they remain the single largest source of fundraising income. This year CareFlight launched Jackaroo & Jillaroo Bear (a married couple), Boy & Girl ER Bears and Santa Bear. Bear sales increased to a record 94,918 - a veritable population explosion of bears.

### Philanthropic foundations

Trusts and foundations are created for philanthropic purposes by generous individuals, families and companies. The foundations have strict guidelines for granting gifts to

ensure that the distribution of funds reflects the intention of trust founders and managers. NRMA CareFlight is widely and generously supported by a number of trusts and foundations. These include The Trust Company of Australia Limited, RA Gale Foundation, Profield Foundation, Perpetual Trustees, The Corio Foundation, The Bluesand Foundation, the Bill & Patricia Ritchie Foundation, Australian Ethical Investment and the James N Kirby Foundation.

### Improving communications with our supporters

CareFlight's database is an essential tool for maintaining contact with our 150,000 event attendees, donors and other supporters, whether through mail, email, phone or in person. CareFlight's Raisers Edge donor database program is extremely complex. In 2006, CareFlight employed a leading exponent in this program, Maria Dinnison, to improve communications with supporters. This program is now well advanced and will continue to deliver better and more individualised communications to our supporters in the coming years.

### One-armed bandits prove to be Robin Hood

CareFlight was again grateful to receive strong support from the clubs involved in the Community Development Support Expenditure (CDSE) scheme.

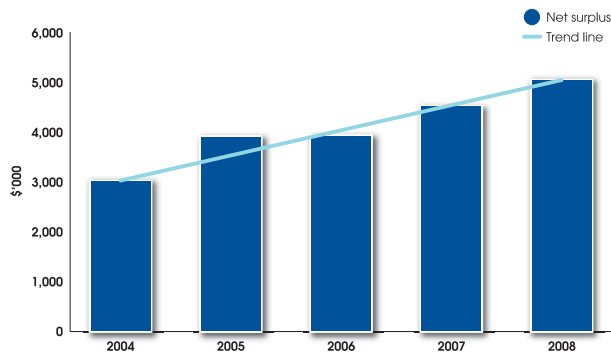


KPMG staff raised funds for CareFlight.



NRMA Marrickville staff visited the base.

Net surplus from fundraising programs



“Our community partners and grass roots supporters have been the lifeblood of NRMA CareFlight for more than two decades...



IGA raised \$50,000 for CareFlight.



4WD Venture goes to Stockton Beach.



The Woodford to Glenbrook Classic.

The scheme, established by the NSW Government, allocates a percentage of poker machine revenue to local community projects and services. This year the clubs experienced a downturn in net poker machine revenue due, in part, to the introduction of non-smoking laws in 2007.

Despite this drop, CareFlight received support from Bankstown Trotting Recreational Club, Botany RSL Club, Canterbury Hurlstone Park RSL Club, Earlwood Ex-Servicemen's Club, Narooma Golf Club, Campsie RSL Sub-branch Club, Gladesville Bowling & Sports Club (now trading as Gladesville Sporties), Young Services & Citizens Co-op Club, Kiama Leagues Club, Pittwater RSL Club, Mandarin Club, Leo McCarthy Memorial Smithfield RSL Sub-Branch Club, Blacktown Workers Club, Ryde-Eastwood Leagues Club and Carlingford Bowling Sports & Recreational Club, among others.

#### Workplace giving program

Workplace giving is an easy and cost effective way for employees to support NRMA CareFlight and the community. The regular support we receive through workplace giving enables us to plan effectively. We particularly appreciate that some of our workplace giving supporters have been giving to CareFlight regularly for

more than six years. This year we have developed a new brochure which we hope to use as a key promotional tool to encourage further building of our workplace giving scheme. Please feel free to phone NRMA CareFlight for more information.

#### Community involvement through events

As local communities continue to provide more and more support for CareFlight, we appointed Events Manager Don Kemble to co-ordinate events. Various community organisations and individuals held five golf days, two street parades, three gala dinners, a 4WD Venture and even a 'mini' airshow. In total over 30 events were run for NRMA CareFlight, raising urgently needed funds and raising awareness of the need for CareFlight's services.

The NRMA CareFlight Woodford to Glenbrook Classic again ran through the Blue Mountains National Park in July 2007, and despite a two-week weather delay, 680 participants raised almost \$18,000 for NRMA CareFlight while keeping fit and having fun.

Community Clubs and Organisations continued to show interest in supporting NRMA CareFlight by attending Base Dinners and requesting Community

Talks. The fundraising team travelled all over the countryside to accommodate the groups who continue to fundraise to keep our doctors in the air!

#### Community day at Tahmoor

Now a regular feature on the annual NRMA CareFlight events calendar, the Tahmoor Community Day was again held on a beautiful September spring day. A huge crowd turned out to see the ever-expanding event which featured displays from the Army, Police, Fire Brigades, Ambulance, Rural Fire Service, NRMA, Car Clubs and a whole lot more. Organised by a dedicated committee of community volunteers led by Di Clarke from the NRMA Picton office and Di Lange, the event raised \$43,000 for NRMA CareFlight. Congratulations and thank you to the Wollondilly Team and Community.

#### Generous communities

The highly popular IGA Northern Locals Charity Golf Day was held again this year. We are grateful to the 'local blokes' at the 19 IGA stores who raised over \$50,000 for NRMA CareFlight through a golf day and an evening gala dinner at the Wauchope RSL Club on the NSW North Coast.

We were lucky to secure the wonderful support of South Coast residents through the "Sussex Inlet Choppers for

Charity" community weekend. A nine-hole golf competition was followed by a dinner dance at the Sussex Inlet RSL Club on Saturday and a massive community street parade and festival along the shores of the inlet on Sunday - a great day for everyone and a highly successful fundraiser.

We are also grateful to the dozens of other service and social clubs, businesses and individuals who put on fundraising events for CareFlight. As always, we can depend on Lions and Rotary, among others, to fund many aspects of our service.

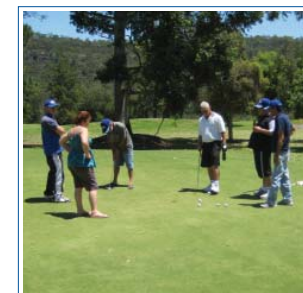
#### Biggest NRMA CareFlight fundraising event ever

The highlight of the year for Fundraising was undoubtedly the 2007 Oktoberfest Dinner held at Moore Park in Sydney. The event was hosted by our very generous Board Member John Szangolles and his wife Sandi, whose staff from the Bavarian Hospitality Group worked tirelessly with the fundraising team to organise a very enjoyable night for the 350 plus guests. The event raised almost \$250,000 making it the largest ever fundraising event held for NRMA CareFlight. Congratulations and thank you John, Sandi and team.

Paul Freeman  
Fundraising Director



Tahmoor Community Day.



Wisemans Ferry golf day.



Oktoberfest

...because of you we continue to be able to deliver world class medical services. Thank you. ”

## Toddler near-drowning

Joseph English's parents, Sonia and Brendan, spent a frantic minute searching for their missing 14-month-old son before finding him floating face-down in the spa in their Holsworthy home. Joseph appeared to be lifeless: he was not breathing and was beginning to turn blue. While his mother called '000', his father began administering CPR.

NRMA CareFlight was activated and at the scene within 12 minutes of the '000' call being made. Joseph had started breathing again due to the initial CPR efforts of his father and the intervention of experienced ambulance paramedics. However, he was still unconscious and neurologically unresponsive with a GCS of 5. The child had a weak cardiac output and showed nominal respiratory effort.

Joseph needed to be ventilated to control his breathing, but his age, weight and the condition of his lungs

post-immersion complicated his treatment. CareFlight Doctor Shane Trevithick administered an anaesthetic so his airway could be secured by paramedic Peter Bittner for ventilation. However, his lung injury was such that he could not be accommodated by the settings on the portable ventilator, so Dr Trevithick manually ventilated him as he was flown to Westmead Children's Hospital.

Joseph spent a week unconscious in intensive care on a ventilator to oxygenate and 'dry out' his lungs. He then spent a further three days in hospital before returning home.

Despite a grim prognosis, Joseph made a full recovery thanks to the initial resuscitation by his father and the rapid advanced intervention by the doctor-paramedic team.



Right: Brendan, Sonia and Joseph English. Photo courtesy Newspix/Troy Bendeich. Below: Paramedic Peter Bittner, aircrewman Ben Inglis and pilot Ken Vole prepare for takeoff while Dr Shane Trevithick updates the emergency department trauma team on Joseph's condition. Photo courtesy Newspix/Dean Marzolla.

“The combination of the initial resuscitation and the advanced intervention with the anaesthetic made the world of difference.”



## Aviation

The past year has seen us take a new direction as the NRMA CareFlight HEMS operation repositions itself as a boutique rapid response provider in the aero-medical industry.

### Personnel

Aviation staff levels have fluctuated during the course of the year. Having initially reduced our operating crews following the tender outcome, new growth opportunities have required us to now increase our staff numbers.

We welcomed a new pilot and welcomed back three casual aircrewmen. In addition we introduced a number of new positions. Steve Hughes, former Ambulance Service Station Officer based at CareFlight, has been employed and appointed Business Liaison Manager to help build new business and improve liaison with the Ambulance Service. David Mann, Chief Aircrewman, was appointed Aviation Operations Manager to manage the increasing operational tempo and variety of operations.

Our operating crews remain one of our key resources. The manner in which we have been able to adapt to the changes of the past year, yet remain focussed on providing a high quality service, is due in no small part to the dedication and calibre of our team. The aviation industry is booming, and to maintain the services of such quality people in a market where skills are in high demand and many operators are losing work due to lack of personnel, is testament to the dedication of the NRMA CareFlight team.

### Night Vision Goggles

Our NVG program has taken some great leaps over the course of this year under the capable leadership



Left: Chief Pilot Jeff Konemann  
Right: Chief Engineer Luke Bradshaw

of NVG Project Manager Greg Ohlsson. Because NRMA CareFlight has pioneered NVG in the civil EMS (Emergency Medical Service) space in Australia, the certification process has been long and involved to ensure our suite of documents captured all the appropriate regulations. After a CASA audit spread over three days in October 2007, NRMA CareFlight was finally granted approval to use NVG.

Flight tests were required in order for Greg Ohlsson to be endorsed as an

NVG pilot and NVG flight instructor, and to endorse the Chief Pilot Jeff Konemann. These flight tests were successfully conducted in Darwin. NVG flying training for our other pilots and air crewmen continues.

NRMA CareFlight had the opportunity to use NVG in April when participating in a search and rescue mission off the south coast of Sydney. A twin-engine plane vanished off radar around midnight, and civil and military aircraft were called in to search for the missing



Night vision goggles.



CareFlight provided medical support at the Bathurst 1000 race in October.

plane. NVG enabled the crew to locate some wreckage and fuel along the coastline. It was the first time NVG had been used to assist a search and rescue mission in NSW.

NRMA CareFlight is currently awaiting Ambulance Service approval to commence night time HIRT operations in the near future.

#### HIRT

HIRT continues to underpin our foothold in the NSW aero-medical market. The trial is running very well from an aviation perspective. Patient response times average around 15 minutes and we are now consistently achieving better than 95% online availability – a remarkable achievement in the HEMS world.

This essential service has recently expanded from its former operating footprint in the greater Sydney region to include the Central Coast area to the north. Operations to the Central Coast started on 12 December 2007

following lengthy negotiations with the NSW Government, NSW Health and Ambulance Service to define operating parameters and tasking arrangements.

Our expectation is that HIRT will transform into a full-time Rapid Response Head Injury/Trauma Retrieval Service, providing the people of NSW with a much needed and world leading aviation and medical response to severe trauma.

#### Helicopter purchase

In March this year we signed an agreement to purchase the BK 117 helicopter which we had formerly leased. The BK serves as back-up to the Augusta 109E Power, the primary HIRT helicopter, and ensures that we can provide continuous service to the community when the Power is undergoing scheduled maintenance.

The BK is also used for training and is available to be tasked for search and rescue activities as it has winch capability.

#### Aero-medical opportunities

The change to the CareFlight operating model over the past year has seen some areas of aero-medicine open up that were previously out of the operating scope of the company. We have also been building relationships with other aero-medical organisations with the aim of sharing resources to provide greater depth of support within the aero-medical community.

This year we have been working with CareFlight Queensland and the Sunshine Coast Helicopter Rescue Service (SCHRS) which has been invaluable in allowing our crews to maintain their full range of aero-medical skills as pilots and aircrewman. We currently supply aircrew to SCHRS on a full time basis and utilise seconded aircrew from CareFlight Queensland to work on the commercial side of our operations.

At the end of 2007 we were contracted to provide Aero-Medical Evacuation (AME) support to the Australian

Defence Force in a series of military exercises in the Northern Territory. This work continues as we develop relationships with the Department of Defence, Aspen Medical and International SOS (ISOS). In 2008 we secured follow-up AME work for three exercises in far north Queensland.

Over the past 12 months we developed the racetrack support market in partnership with MediTrak. We provided on-site emergency medical support at two major events in NSW, the Bathurst 1000 race in October 2007 and the Australian AIGP at Eastern Creek in February 2008.

These opportunities have given us a valuable foothold in the Australian aero-medical market, returning an income stream to help fund our vital work in providing rapid response trauma services to the people of NSW and beyond.

#### Engineering

Engineering facilities were upgraded during the year. We built new offices for the engineering staff and created additional storage space to comply with the strict regulations laid down by CASA.

In January the Augusta 109E Power helicopter cockpit was modified for NVG. Both our helicopters are now certified for NVG flight.

The biggest challenge for the engineering team this year has been providing support to the BK 117 helicopter in the Defence Force AME work in northern Australia. They have had to adapt to working in remote locations on a fly-in fly-out basis. This has necessitated rigorous advance planning of the engineering support function to ensure that the right equipment is available to our engineers in the field.

#### Thank you

The past year has been a turning point for NRMA CareFlight. We have continued to deliver a quality product to the community of NSW, with an increased availability and scope of operation. Thank you to all our supporters – your generosity has enabled us to deliver this service. Thank you also to all the team here at NRMA CareFlight – your dedication bodes well for our future.

**Jeff Konemann**  
Chief Pilot



The NRMA CareFlight helicopter flew Maria to Royal North Shore Hospital. Photo courtesy Newspix/News Ltd.

## Pedestrian injury

Little Sophia miraculously escaped injury when she was knocked out of her mother's arms by a reversing utility in Dee Why one morning. Her mother was not so lucky.

Maria was carrying her 12-month-old daughter down the street when she was hit by the ute. Sophia flew into the air and landed unhurt in a soft pile of leaves in the tray of the vehicle. Maria landed on her back in the road, hitting her head as she fell.

The initial '000' call alerted NRMA CareFlight to the possibility of an injured infant and the helicopter, crewed by pilot Ian Smart, aircrewman David Mann, Dr Rob Bartolacci and paramedic Peter Bittner, prepared for take-off. As more information became available, it transpired that it was in fact the mother who required medical attention. Police stopped peak hour traffic in busy Pittwater Road so that the helicopter could land, and Dr Bartolacci and paramedic Peter Bittner sprinted the 130m to the scene of the accident where ambulance paramedics were in attendance.

The patient's GCS was initially 14, but this quickly dropped to 11. She became incoherent and agitated so the decision was made to ventilate her to reduce carbon dioxide levels and prevent possible secondary brain injury. She was sedated and intubated and placed on a ventilator to control her breathing.

Maria was transported to the helicopter by ambulance, and then flown to Royal North Shore Hospital under full intensive care treatment. She remained in hospital for three days before returning home, fully recovered.

# CareFlight Air Ambulance

The inauguration of CareFlight's Darwin service in February 2007 began the year on a high note and kick-started a new trajectory of national expansion for our organisation.

Highlighting the definite need for our Darwin base was the fact that CareFlight's jet was actually away doing a mission on the opening day, and we had to rapidly sticker up one of the other Westwind jets in the Pel-Air hangar!

The Darwin operation started slowly, as we had the customary minor teething problems associated with initiating a new venture, but began to take off a few months after opening. It is now well established and providing a much-needed service for the Northern Territory. It is also supporting the Australian Defence Force personnel in Dili in a very strategic way, something we can all be proud of, as well as continuing to support most of our long-time assistance company customers and some new ones.

Darwin is ideally positioned to service South-East Asia and the north of Australia. Our Darwin team has

already undertaken some very high profile missions. In February 2008 the gravely wounded President of East Timor, Dr Jose Ramos-Horta, was flown under intensive care treatment from Dili by a CareFlight Air Ambulance retrieval team to undergo treatment at Royal Darwin Hospital.

The number of Darwin missions is increasing steadily every few months. Like our Sydney base, Darwin has its down times, and then it hits all at once. Fortunately, our well-honed operation is always at the ready to take action and be on the scene with top-notch medical assistance when needed.

Next in our plan to provide Australia with a nation-wide network of bases under the CareFlight brand was the launch of CareFlight's Perth service in June. It is the first time Western Australia has had access to a rapid response medical team to retrieve seriously ill patients from as far as South-East Asia.



**National Manager  
CareFlight Air Ambulance  
Colin Robshaw.**

The Perth based operation is a strategic alliance between CareFlight NSW and CareFlight Queensland. A dedicated jet, a Westwind II, is provided through a partnership with Pel-Air Aviation, and the doctor/nurse medical teams from a partnership with Ramsay Healthcare's Joondalup Campus.

Perth, with its strategic location and exceptional medical system, is an exciting place for CareFlight to be positioned. Our niche there will become even more valuable in the coming years as the population of WA continues to grow at a rapid rate.

CareFlight is moving ahead in leaps and bounds, and this latest expansion will add another dimension to our operations, with many more opportunities awaiting us.

Some of those opportunities have come about as a result of the sterling reputation we've gained in working with the Australian Defence Force. More assistance companies are keen to partner with us in emerging business opportunities, such as aero-medical retrieval services to various government agencies and to the oil



Australian soldiers lift President Dr Ramos-Horta into the medi-jet.

and gas industries in Western Australia and the Northern Territory.

CareFlight, in partnership with our counterparts in Queensland, is now uniquely placed to operate Australia's first national network of jet air ambulances from its bases in Perth, Darwin, Sydney, the Gold Coast and soon Townsville, offering high-acuity clinical medical care that is specialty-driven. CareFlight Air Ambulance offers an Australian teaching hospital standard of critical care medicine to the most remote areas of Australia and abroad and, importantly, maintains this level of care throughout the sometimes difficult journey home.

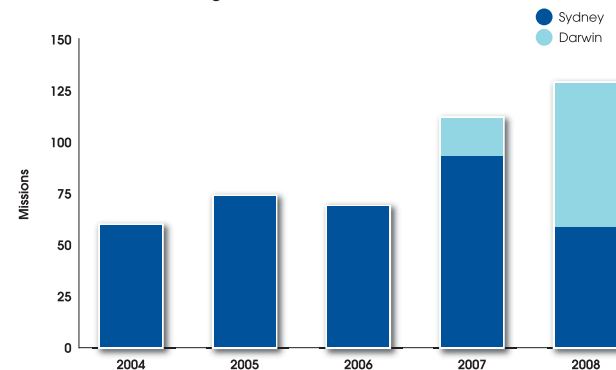
The Chairman of CareFlight NSW, Dr Andrew Refshauge says, "The

achievement of a national jet air ambulance network means a single phone call could activate up to five jets to converge on the scene of a major disaster. Governments can now immediately call on the CareFlight Air Ambulance jets and their specially-trained medical teams."

It has been a big couple of years for CareFlight Air Ambulance. Our future looks set to grow exponentially and we take on the challenge with enormous enthusiasm and dedication, with the knowledge that the surplus from our operations supports our charitable purpose.

**Colin Robshaw  
National Manager  
CareFlight Air Ambulance**

CareFlight Air Ambulance mission count



CareFlight Air Ambulance retrieves a critically ill patient from the remote Pacific Island of Aitutaki. Photo courtesy Scott Badham.

## President Ramos-Horta assassination attempt

CareFlight, the Australian military and staff at Royal Darwin Hospital were all instrumental in the remarkable recovery of East Timorese President Dr Ramos-Horta after he was shot in an assassination attempt in February.

Dr Ramos-Horta had just returned to the presidential palace in Dili following a routine dawn walk when he was hit in the back by two high-velocity shots. The raid was led by rebel Alfredo Reinado who himself was killed by guards during the melee.

Once the shooting ceased, Dr Ramos-Horta was rushed to the Australian military hospital in Dili where he underwent immediate emergency surgery, including a transfusion of 16 units of blood. While this initial stabilisation was taking place, the CareFlight Air Ambulance intensive care team of Dr Carissa Oh and nurse Julie Rattenbury made the one-hour dash north from Darwin to East Timor. Due to a security lockdown, they were met at the airport by an Australian military helicopter which flew them to the hospital.

The president was placed on a ventilator on one of CareFlight's mobile intensive care modules and kept in an induced coma. Full intensive care treatment continued as he was transported to the waiting medi-jet at Dili airport and then flown to Royal Darwin Hospital.

Two months later the co-winner of the 1999 Nobel peace prize, Dr Ramos-Horta, returned to East Timor where he received a hero's reception.

# Board and Management

## Board of Directors

**Ian Badham**  
BSc, OAM  
Executive Director  
Member of the Audit Committee  
In office since 9 May 1986

**Dr Sean Beehan**  
MB, ChB, FANZCA  
In office since 18 July 2002

**David Bowen**  
BA, Dip Law  
In office since 18 December 2007

**Derek Colenbrander**  
BA, LLB  
Chief Executive Officer  
Executive Director  
In office since 9 December 2003

**Gary Dransfield**  
NRMA Nominee Director  
In office since 15 June 2007

**Norman Hilton**  
BCom, FCA  
Chairman of the Audit Committee  
In office since 22 March 1999

**Douglas Pearce**  
BSc, MBA, MACS, FCIS  
Member of the Audit Committee  
In office since 6 May 1997

**Dr Andrew Refshauge**  
MB, BS, FAICD  
Chairman  
In office since 18 December 2007

**John Szangolies**  
FAICD, FCIA  
In office since 31 August 2004

**Company Secretary**  
**Peter Quayle**  
BCom, FCPA  
In office since 22 July 2004

## Management and Senior Operational Team

### Administration

**Derek Colenbrander**  
Chief Executive Officer

**Ian Badham**  
Media Relations Manager

**Jude Pettitt**  
Clinical & Human  
Resources Manager

**Rajini Surendran**  
Finance Manager

**Gary Williams**  
Chief Information Officer

### Fundraising

**Paul Freeman**  
Fundraising Director

**Trent Osborn**  
Relationships Manager

**Don Kemble**  
Events Manager

**Maria Dinnison**  
Database Manager

### Medical

**Dr Alan Garner**  
Medical Director

**Dr Peter Clark**  
Supervisor of Training

**Dr Ken Harrison**  
Director of Medical Education &  
Disaster Planning

**Dr Shane Trevithick**  
Medical Manager Bankstown Base

### Aviation

**Jeff Konemann**  
Chief Pilot

**Luke Bradshaw**  
Chief Engineer

**David Mann**  
Operations Manager

**Steve Hughes**  
Business Liaison Manager

### CareFlight Air Ambulance

**Colin Robshaw**  
National Manager  
CareFlight Air Ambulance

**Paul Smith**  
Sydney Base Manager  
Logistics & Nurse Manager

**Peter Murphy**  
Darwin Base Manager

**Steve Martz**  
Perth Base Manager

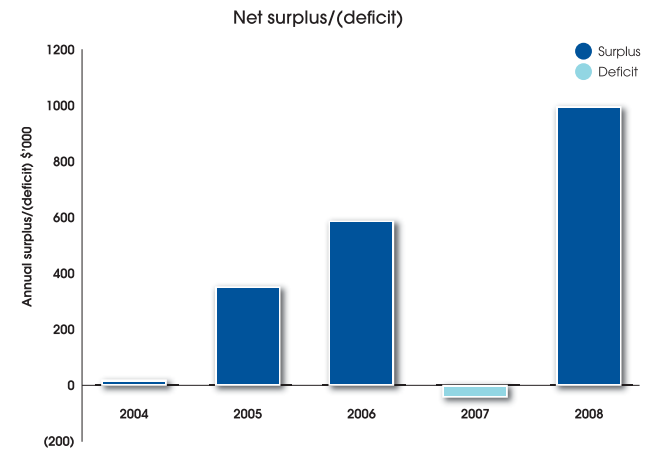
# Financials

We finished a year of transformation in a very sound position, recording a surplus of \$983,509.

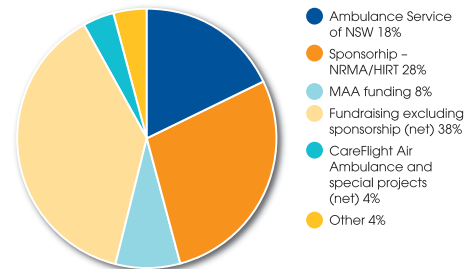
The financials underpinning the organisation are in excellent shape and will provide a solid base to support our new operational initiatives. Working capital is very strong and net assets climbed from \$4,220,178 in 2007 to \$5,695,186 in 2008.



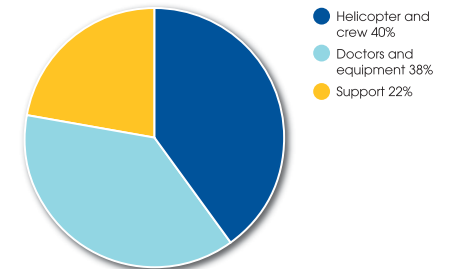
Finance Manager  
Rajini Surendran



### Where the money comes from... 2008 Revenue



### Where it goes... 2008 Expenses



## Independent Audit Report to the Members of CareFlight (NSW) Limited

We have audited the summarised consolidated income statement for the year ended 30 April 2008 and the summarised consolidated balance sheet of CareFlight (NSW) Limited as at 30 April 2008, in accordance with Australian Auditing Standards. These summarised consolidated financial statements have been derived from CareFlight (NSW) Limited's Annual Statutory Financial Report.

In our opinion, the information reported in the summarised financial statements is consistent with the Annual Statutory Financial Report from which it is derived and upon which we expressed an unqualified audit opinion. For a better understanding of the scope of our audit, this report should be read in conjunction with our audit report on the Annual Statutory Financial Report.

KPMG  
Sydney

## Summarised Consolidated Income Statement

For the year ended 30 April 2008

	2008 \$	2007 \$
<b>Revenue</b>		
Ambulance Service of NSW	2,341,836	4,222,825
Motor Accidents Authority	1,000,000	-
Other medical and helicopter retrieval revenue	5,407,039	4,038,973
Fundraising	13,483,329	12,665,022
Other revenue	42,626	4,465
<b>Total revenue</b>	<b>22,274,830</b>	<b>20,931,285</b>
<b>Expenditure</b>		
Operations and administration – cost of personnel	7,977,331	6,955,420
Direct costs of medical and helicopter retrieval	4,726,836	4,964,610
Cost of fundraising	4,816,727	4,522,616
Depreciation and amortisation	1,074,701	1,256,843
Insurance	342,740	361,022
Professional fees	797,864	961,925
General overheads	1,150,977	1,052,790
Impairment loss on non-current assets	5,486	691,461
<b>Total expenditure</b>	<b>20,892,662</b>	<b>20,766,687</b>
<b>Surplus before net financing costs</b>	<b>1,382,168</b>	<b>164,598</b>
Finance income	178,043	240,616
Finance expense	576,702	438,174
<b>Net finance income and expense</b>	<b>398,659</b>	<b>197,558</b>
<b>Net (deficit)/surplus for the year</b>	<b>983,509</b>	<b>(32,960)</b>

## Summarised Consolidated Balance Sheet

As at 30 April 2008

	2008 \$	2007 \$
<b>Current assets</b>		
Cash assets	4,881,113	3,928,634
Receivables	1,669,791	1,373,679
Inventories	182,984	134,938
Asset held for sale	-	2,056,120
Investments	1	-
Other	558,300	1,065,453
<b>Total current assets</b>	<b>7,292,189</b>	<b>8,558,824</b>
<b>Non-current assets</b>		
Helicopter	4,016,279	4,112,240
Property, plant and equipment	1,754,279	1,532,984
<b>Total non-current assets</b>	<b>5,770,558</b>	<b>5,645,224</b>
<b>Total assets</b>	<b>13,062,747</b>	<b>14,204,048</b>
<b>Current liabilities</b>		
Trade and other payables	3,544,702	5,334,411
Interest bearing liabilities	1,106,459	3,526,388
Provisions	902,835	963,708
<b>Total current liabilities</b>	<b>5,553,996</b>	<b>9,824,507</b>
<b>Non-current liabilities</b>		
Interest bearing liabilities	1,761,421	11,174
Provisions	52,144	148,189
<b>Total non-current liabilities</b>	<b>1,813,565</b>	<b>159,363</b>
<b>Total liabilities</b>	<b>7,367,561</b>	<b>9,983,870</b>
<b>Net assets</b>	<b>5,695,186</b>	<b>4,220,178</b>
<b>Capital funds</b>		
Reserves	1,136,829	731,533
Retained surplus	4,558,357	3,488,645
<b>Total capital funds</b>	<b>5,695,186</b>	<b>4,220,178</b>

These summarised financial statements have been derived from CareFlight's Annual Statutory Financial Report for the year ended 30 April 2008, which can be viewed on CareFlight's website [www.careflight.org](http://www.careflight.org)



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[www.careflight.org](http://www.careflight.org)

ABN 18 210 132 023

