Volunteer Team Visits

2018 | 2019

ETHIOPIA
27.02.2018–05.08.2018 (PHYSIOTHERAPY)
Ms Rebekah Laurenson, Physiotherapist
Mr Max Sadka, Physiotherapist
15–24.08.2018 (ORTHOPAEDICS)
Dr Tony Jeffries, Orthopaedic Surgeon
Ms Stephanie MacDonald, Physiotherapist
08–10.10.2018 (SARCOMA TRAINING)
Prof David Wood, Orthopaedic Surgeon
17.11.2018–01.12.2018
[WARD NURSES TRAINING]
Mrs Ann Mitchell, Nurse
Ms Diana Carmony, Nurse
Ms Saha Webb Ware, Nurse
Ms Eyerusalem (Jerry) Amanu Legesse, Chief Theatre Nurse, Black Lion Hospital
18–24.08.2018 (ORTHOPAEDICS)
Dr Tony Jeffries, Orthopaedic Surgeon
Ms Stephanie MacDonald, Nurse
Dr Said Osman Dahr, Orthopaedic Resident
Ms Felesiwo Gebreselassie, Ethiopian Theatre Nurse
Ms Hodein Ali Iskak, Ethiopian Nurse
MADAGASCAR
21.10.2018–04.11.2018
Dr Graham Forward, Orthopaedic Surgeon
Dr Shaun English, Orthopaedic Surgeon
Dr Hock Tan, Anaesthetist
Dr Digby Cullen, Gastroenterologist
Dr Chiang Siah, Gastroenterologist
Mrs Catherine Poole, Gastroenterology Nurse
Ms Jackie Crock, Gastroenterology Nurse
Ms Nicole Harrison, Gastroenterology Nurse
Dr Lydia Puta Johns, Urologist
Ms Kyle Cress, Urology Nurse
Dr Latif Kadhim, ENT Surgeon
24.11.2018–09.12.2018
[OBSTETRICS/GYNAECOLOGY]
Dr Lanziz Homar, Obstetrician/Gynaecologist
Mr Graham Rennie, Registered Nurse
31.03.2019–14.04.2019
Dr Susan Chapman, Urologist
Ms Karen Graves, Urology Theatre Nurse
Dr Latif Kadhim, ENT Surgeon
26.05.2019–09.06.2019 (UROLOGY)
Dr Richard McMullin, Urologist
Dr Berni Troncoso Solar, Paediatric Surgeon
Dr Michael Shaw, Anaesthetist
Ms Julie Fahey, Urology Nurse
SOMALILAND
25–29.03.2019 (ORTHOPAEDICS)
Dr Graham Forward, Orthopaedic Surgeon
Dr Iliax Ahmed Ibrahim, Ethiopian Orthopaedic Surgeon
Dr Melesse Garde Belete, Ethiopian Orthopaedic Surgeon
Dr Said Osman Dahr, Orthopaedic Resident
Ms Felesiwo Gebreselassie, Ethiopian Theatre Nurse
Ms Hodein Ali Iskak, Ethiopian Nurse
16–30.06.2019
Dr Li-on Lam, Orthopaedic Surgeon
Dr Bob Jang, Orthopaedic Registrar
Mrs Charmie Ganat, Orthopaedic Theatre Nurse
Ms Lucy Harris, Orthopaedic Theatre Nurse
Mr Rob Ganat, Logistics
Dr Latif Kadhim, ENT Surgeon
Dr Dennis Millard, Anaesthetist
Dr Dayse Tavora Vieira, Audiologist
Ms Marika Brandtberg, ENT Theatre Nurse
Mr Max Nelson, Videographer
COMOROS
13–28.10.2018 (ORTHOPAEDICS)
Dr Lachie Mitr, Orthopaedic Surgeon
Ms Josie Sabourin, Orthopaedic Nurse
Dr Miles Earl, Anaesthetist
Dr Clem McCormick, Orthopaedic Surgeon
Dr Samuel Van de Velde, Orthopaedic Surgeon
ERITREA
14–17.03.19 (SCOPING ORTHOPAEDICS)
Dr Graham Forward, Orthopaedic Surgeon
Thank you to all our volunteers who gave up their time to make a contribution to better the lives of those with health needs.
Our Impact

2018 | 2019

- **1,936** Consultations
- **160** Children screened for clubfoot
- **569** Surgical procedures
- **428** Medical professionals provided with training
- **4** Containers of medical equipment despatched
- **$386,480** Volunteer time provided through overseas missions
- **8** Doctors awarded specialist training scholarships
- **2** Airfreight pallets of medical equipment despatched
- **569** Medical professionals provided with training
- **5** Hospitals renovated and equipped
- **$854,872** Medical equipment donated
- **63** Volunteers joining overseas missions
- **36** Australian-based volunteers engaged
By ensuring strong foundations and best practice, Australian Doctors for Africa has continued to reach more doctors, nurses and hospitals in Africa. By training and equipping specialists in-country, the ongoing health needs of larger populations can be improved.

Volunteers are the heartbeat of the organisation and the year presented thrilling experiences and wonderful service from surgeons, doctors, nurses, physiotherapists, logistics people, administrators and the Board of Management. My personal thank you to each of you.

2019 has seen more teams, more specialities, more countries, more doctors trained and many more people treated. Large building and equipment projects were successfully completed in Ethiopia at Hawassa and Harer, and in Madagascar at Cenhossa Hospital, HURA Hospital, and a new Clubfoot Clinic in Amphaney.

Congratulations to Dr Latif Kadhim, ENT Surgeon, and his team for converting a scoping study into a full ENT program in Tulear, Madagascar; notable for testing and fitting the first hearing aid in the region.

In other steps, consistent with the Strategic Plan, a scoping study was conducted in Asmara, Eritrea, to consider providing orthopaedic development assistance in that country.

As an organisation, we are committed to best practice and are leaders in clinical governance thanks to Dr Shirley Bowen and Dr Rob Storer.

Australian Doctors for Africa counts 2018/19 as a successful year of growth, cost-effective delivery of services and positive experiences for volunteers.

DR GRAHAM FORWARD
Founder and CEO

“As we move up the development staircase the emphasis of our activities has moved to train and equip.....”

This year has been one of continued growth in our core activities. We have also taken the opportunity to review our corporate structure to allow for the future independence of our vibrant and growing organisation.

The breadth of our activities is well covered elsewhere in this annual report, so I will focus on our new structure.

By way of background, ADFA was established by our founder Dr Graham Forward in September 2005 as a private company to facilitate both the receipt of small donations and the coordination of volunteers for its charitable activities following the Tsunami in December 2004.

After 14 years it is now considered appropriate to move to a more traditional structure, being a company limited by guarantee and controlled solely by its members. This was achieved this year with great assistance from our pro bono lawyer (and past chairman) Mr David Martino.

I am pleased to say we have a new constitution and structure representing best corporate practice for the charitable sector.

I would like to finish by once again thanking our incredibly hard working and dedicated staff in Dawn Woods and Amy Tasker, our volunteer and equally committed Board, and lastly our founder and visionary Dr Graham Forward. Graham’s work in both the charitable sector and orthopaedics was recognised this year by being awarded a Member of the Order of Australia, recognition which is richly deserved.

I urge all of our supporters and donors to continue your support for ADFA as it makes a genuine difference to the lives of so many less fortunate than us.

JOHN BOND
Chair
VISION

Improving the health and lives of people in Africa.

BACKGROUND

Established in 2005, Australian Doctors for Africa is a not for profit, volunteer medical humanitarian organisation, providing medical training and services, hospital equipment and infrastructure development to Ethiopia, Somaliland, Madagascar and Comoros. ADFA is the only Western Australian based charity to be accredited with the Department of Foreign Affairs and Trade (DFAT) and it has no political or religious affiliations.

PATRONS

We are grateful for the support of our two patrons:

• **Professor Barry Marshall, Nobel Laureate:** ADFA’s Research Patron with a particular interest in the direction and operation of programs in Madagascar.
• **Mr Haile Gebreselassie, Olympic and World Champion:** Appointed ADFA’s Ethiopian Patron in April 2018 to increase the profile of ADFA, within the Ethiopian community both in-country and internationally.

OUR APPROACH

The organisation is guided by a 5-year Strategic Plan adopted by the Board of Management in November 2017. In our target regions we have established strong collaborations and stakeholder networks with Ministers, government departments, medical facilities, other humanitarian aid organisations and the larger community.

There are four elements to our programs:

1. Medical Service Provision: delivered by volunteer teams in the areas of orthopaedics, clubfoot, gastroenterology, urology, gynaecology/obstetrics, ENT and paediatric surgery.
2. Skills Transfer and Training: incorporated into all program delivery and through formal training and scholarship programs.
3. Hospital Infrastructure: renovation and building projects and provision of medical equipment, implants and supplies.
4. Advanced Development: through clubfoot screening and treatment programs and collaboration with government agencies regarding strategic direction of healthcare provision.

STRATEGIC PRIORITIES

In November 2017, the Board of Management of Australian Doctors for Africa adopted a new five year Strategic Plan for 2018 to 2022. Strategic priorities over the next five years will be characterised by growth, which will largely be achieved through expanding programs and only adding new initiatives which can be properly funded and resourced.

1. Progress the 13 Hospitals Project with training and empowerment of local surgeons, doctors and nurses.
2. Develop world leading procedures and practices for a medical outreach charity.
3. Maintain ADFA humanitarian values and ensure they are expressed in all our activities.
4. Develop collaborations and partnerships
5. Develop a systematic approach to fundraising including securing a cornerstone grant.
6. Develop a national policy for clubfoot in Madagascar.
7. Incorporate training and teaching in all medical visits.
8. Expand the range of specialities provided by volunteers.
Muniira’s Story
Saved from a lifetime of disability through access to clubfoot treatment provided by Diversity Action Network in partnership with Australian Doctors for Africa.

Muniira’s mother did not hesitate when she set off from her home village of Qudah Raamaale on the Ethiopian-Somali border to travel the 100kms to Hargeisa, the capital city of Somaliland. She had taken this trip before, when her eldest daughter needed treatment, and now it was Muniira’s turn.

Little Muniira is only 8 months old and was born with clubfoot deformity in her left foot. Clubfoot is a congenital deformity which is caused by the abnormal development of the baby's bones, ligaments and muscles whilst in the womb. If left untreated the deformity would cause her a lifetime of disability and pain. People with untreated clubfoot often experience difficulties in accessing education, healthcare and employment, as well as feeling socially isolated.

At the clubfoot clinic Muniira received two casting sessions which involved manipulating the foot and setting it in plaster cast. Once the cast was removed, Muniira was fitted with a temporary foot abduction brace to prevent the relapse of the deformity. Muniira’s family is currently separated and her mother works hard to take care of her four children with the support of her family. Having access to clubfoot treatment means that her daughters will lead lives free from disability and social exclusion.

“I highly appreciate the quality and warm welcome of the clubfoot clinic staff and the service was very satisfactory. My two daughters who otherwise would have developed life disability are now treated and will walk like any other child”.

Muniira’s Story
Saved from a lifetime of disability through access to clubfoot treatment provided by Diversity Action Network in partnership with Australian Doctors for Africa.
In between clinical duties, the team with the Secretary General of Health to discuss visas, Ministry assistance, accessing sterilisation services at El Maarouf Hospital and healthcare policy.

Clubfoot
As with previous visits, clubfoot was a key focus during this trip. There was an increase in the number of cases requiring surgery despite improved casting techniques. The team performed one correction on a ten-year-old with neglected clubfoot, with all other surgeries being on children under the age of 4. The establishment of a formal clubfoot program and technician training will be a major objective during 2020.

Rickets
The team saw more than 30 patients affected by rickets, which is a particular problem in Comoros due to clothing that minimises skin exposure, nutritional deficiencies and prolonged breast feeding. This year the team obtained high concentration vitamin D from a local pharmacy and gave patients a six monthly dose, with plan for review and repeat dosing in 6 months. Patients from previous years were again reviewed, with significant improvement in most cases. Two successful osteotomies were performed for residual rickets; one on a 15 year-old who had his other side corrected in 2017 with an excellent outcome, and the other on a 24 year-old with a near 90-degree deformity at the knee. Government officials were advised that rickets is a significant problem in Comoros and needs to be the target of a public health initiative.

Ausplow provided generous support again this year, with a donation towards the cost of the mission and for the purchase of medications and resources. Our sincere thanks to John Ryan AM, Managing Director of Ausplow Farming Systems, for generously supporting this program.

In early 2019, the Board of Management endorsed the recommendations from an evaluation of the Comoros programs to increase the number of trips and investigate the implementation of formal Rickets and Clubfoot Programs. Missions are planned for August 2019 and May 2020.

ACKNOWLEDGEMENTS

• Her Excellency Jenny Dee, Australian High Commissioner to the Comoros, for her support of ADFA activities
• Ausplow Farming Systems for their generous support of our Comoros programs
• Ms Zahara Toyb for in-country support and assistance
• Murdoch Surgicentre for the generous donation of medical supplies.

As with all ADFA missions, there was also a training focus, with 13 doctors, nurses and physiotherapists provided with hands-on training and mentoring. Many of the same staff had worked with the team before and some showed good retention of training provided in previous years. In between clinical duties, the team with the Secretary General of Health to discuss visas, Ministry assistance, accessing sterilisation services at El Maarouf Hospital and healthcare policy.
A second orthopaedic team visited Felege Hiwot Referral Hospital and Tibebe Ghion University Hospital, Bahir Dar, in April 2019. A two-day orthopaedic training session was held for 38 registrars and 7 consultants, which included practical demonstrations and a lecture on the principles of performing surgery. Nursing and theatre staff were taught about the importance of infection control, hand hygiene and wound management. The team assisted 137 patients during ward rounds and daily outpatient consultations, as well as performing 10 surgical procedures.

Basic Orthopaedic Management Course
In conjunction with AO Alliance, ADFA team members conducted a 3-day Basic Orthopaedic Management Course in trauma to 1st year residents at the Black Lion Hospital, Addis Ababa. The program included peri-operative medicine lectures and participation in the delivery of the practical applications of orthopaedic surgical procedures. The course was well received with 40 residents, including 1 female, completing the training. This is the fourth occasion that the AO Alliance and ADFA partnership has presented the course and follows on from previous successful ADFA orthopaedic visits. The Black Lion Orthopaedic Department took on the role of organising the course this year, with ADFA and AO Alliance taking supervisory roles. This is a positive outcome for the sustainability of the program and contributes greatly to building capacity in the Ethiopian health system. ADFA conducted gender equity discussions with the Orthopaedic Training Program Director to identify opportunities and strategies to increase participation of female registrars.

Orthopaedic Ward Nurses Training Program
Three ADFA nurses travelled to Bahir Dar in November 2018 to carry out the Ward Nurses Training Program at Felege Hiwot Referral Hospital and Tibebe Ghion University Hospital. This program continues to be very successful, engaging well with local staff and providing valuable support, resources and mentorship. The training is delivered through classroom-based learning and practical assessment activities. 24 nurses completed the course at Felege Hiwot Referral Hospital; this year was the first year that the program was run at Tibebe Ghion University Hospital with 12 nurses participating. Pre and post multiple choice assessment showed an improvement in the average grade from 62% to 78% based on the same questions. Participants were provided with certificates of completion and reference material for future use.

The ADFA team treated 47 patients during ward rounds, which also formed part of the practical training component of the course.
1. Hawassa Hospital renovation opening ceremony.
2. Sarcoma Training.

Physiotherapy
Two volunteer ADFA physiotherapists visited Felege Hiwot Referral Hospital, Bahir Dar in July 2018 to conduct a scoping study of physiotherapy services available at the hospital. The primary objective of the visit was to review the physiotherapy department and services through investigating the general functioning of the hospital and the physiotherapy services provided in the Orthopaedic Department. The secondary objective was to teach the physiotherapy and nursing staff the basics of early mobilisation and exercises. The team successfully collaborated with the Head Nurse and Orthopaedic Consultant to encourage better rehabilitation programs and communication between nurses and doctors on the importance of post-operative mobilisation. 25 orthopaedic nurses took part in the training and were provided with manuals for future reference.

Sarcoma Training Course
In collaboration with Nuffield Orthopaedic Department, Oxford University, UK, and with the support of Australian charity Sock It To Sarcoma, ADFA volunteer Prof David Wood conducted a Sarcoma Training Course at the Black Lion Hospital in Addis Ababa. The course was attended by 46 doctors and ran over 3 days, providing a combination of lectures and cadaveric workshops. A recent report on sarcomas have a worse than average prognosis. Four of these scoping studies will be instrumental in planning and developing the first CSSD Training Program which includes the provision of donated medical equipment and supplies.

Scholarships
In the 2019 financial year, ADFA provided scholarships to 6 Somaliland doctors to assist with living costs whilst they complete specialist training in Ethiopia. In January 2019, the first two doctors completed their orthopaedic specialist training and returned to Somaliland as the country’s first orthopaedic surgeons. The remaining doctors are continuing their training in the areas of orthopaedics and general surgery.

Central Sterilising Services Department (CSSD)
CSSD scoping studies were conducted at Felege Hiwot Referral Hospital, Hawassa Hospital, Black Lion Hospital, St Pauls Aabet Hospital and DANU Orthopaedic Hospital to review the existence and compliance of infection prevention and control practices. Site visits were made to each hospital by the CSSD Coordinator, who conducted an inspection of the facilities, reviewed practical procedures, conducted interviews with staff and examined documentation (e.g. policies, cleaning and maintenance records, and training records). The results of these scoping studies will be instrumental in planning and developing the first CSSD Training Program which will take place in late 2019.

INFRASTRUCTURE DEVELOPMENT
This year saw the completion of two hospital renovation projects which included the provision of donated medical equipment and supplies.

The opening ceremony of the ADFA funded two-storey Paediatric Orthopaedic Building at the Hawassa University Comprehensive Specialised Hospital in March 2019 was a great success. The ceremony was attended by the Mayor of Hawassa, President of the University, the Australian Ambassador to Ethiopia and many other health, university and hospital dignitaries. The project involved the construction of a new building to house paediatric orthopaedic wards and bathroom facilities on the ground floor and orthopaedic training facilities and administration offices on the first floor. A sea container of medical equipment was sent from Australia to fully equip the new facility and included beds, mattresses, bedside tables, paediatric and adult wheelchairs, orthotic equipment and various medical consumables. Dr Ephrem (Chief Orthopaedic Surgeon and Clinical & Academic Director) will oversee the facility and ensure the building and equipment is utilised correctly and maintained. The training facilities offer a dedicated area for him to conduct team meetings and regular training sessions.

ADFA also conducted the redevelopment of orthopaedic facilities at Jugal General Hospital, Harar. This project was initiated as a cost-effective way to support ADFA visiting specialists and to empower Ethiopian surgeons to implement their new orthopaedic skills. A sea container of medical equipment was dispatched from Australia to furnish the renovated theatres. The project was closely overseen by ADFA’s Project Manager Mark Nelson and in-country architects Geretta Consult. Dr Moa Chali (Orthopaedic Surgeon) will oversee the theatre rooms and ensure the building and equipment is maintained and utilised correctly.

ADFA wishes to acknowledge the support of HE Peter Doyle, and the Australian Embassy in Ethiopia for their support of the Hawassa and Haran renovation projects through the Direct Aid Program.

During the 2018/2019 financial year ADFA further supported infrastructure development by dispatching one sea container of medical equipment to Jugal Hospital, Harar; four boxes of implants, bone cement and instruments distributed to St Pauls Aabet Hospital, Felege Hiwot Referral Hospital and Hawassa University Comprehensive Specialised Hospital; and a C-arm x-ray to DANU Orthopaedic Hospital.

ACKNOWLEDGEMENTS
• His Excellency, Mr Peter Doyle, Australian Ambassador to Ethiopia and the Direct Aid Program
• The Emirates Airline Foundation for their generous support in transporting medical teams, equipment and personnel
• Dr Geletaw and Dr Biruk, Directors, Orthopaedic Department, and the orthopaedic staff at the Black Lion Hospital, Addis Ababa
• Dr Worku, Orthopaedic Surgeon at Felege Hiwot Referral Hospital, Bahir Dar
• Dr Ephrem, Orthopaedic Surgeon at Hawassa University Hospital, Hawassa
• Dr Claude Martin and the AO Alliance (Switzerland) for their commitment to orthopaedics and ADFAs teaching and training program
• Partners from the CURE Hospital and NOTAA
• Sock It To Sarcoma
• Getaneh Retta, General Manager at Geretta Consult
• Mark Nelson, Australian-based volunteer Project Manager
• The cooperation of Bahir Dar and Hawassa Hospitals to accommodate training courses, infrastructure programs and medical team visits
• Parkerville Craft Group for making drapes and caps

During the 2018/2019 financial year ADFA further supported infrastructure development by dispatching one sea container of medical equipment to Jugal Hospital, Harar; four boxes of implants, bone cement and instruments distributed to St Pauls Aabet Hospital, Felege Hiwot Referral Hospital and Hawassa University Comprehensive Specialised Hospital; and a C-arm x-ray to DANU Orthopaedic Hospital.
Madagascar

Locations
- Cenhosoa Hospital, Antananarivo
- University Hospital, Antananarivo
- General Hospital, Tulear
- Clinique St Luc, Tulear
- Manana Penitra Hospital, Tulear
- Regional Hospital, Antsirabe
- University Hospital, Fianarantsoa
- District Hospital, Ampanihy

Medical Team Visits
- 10

Volunteers
- 35

SERVICE PROVISION AND TRAINING

Orthopaedics
In Tulear, two teams completed 156 patient consultations and 26 major operations, including two amputations, chronic septic arthritis, a tibia bone graft and plate fixation, and orthopaedic infection debridement. The patients were monitored during daily post-operative ward rounds. ADFA continued its training and mentoring of local orthopaedic surgeons, with Dr Hery and Dr Fafah assisting with the surgical procedures and receiving further tenotomy training.

Clubfoot
ADFA's clubfoot screening and treatment clinics are now well established and provide a vital service in the Tulear region. Mentoring and leadership by Dr Kate Stannage, Clubfoot Manager, and regular Ponseti training ensures the clinics are professionally run and well stocked with equipment and medical supplies. The Tulear clinic screened 42 children and treated 32 with plasters, boots and tenotomies. Support continued for the clinic in Fianarantsoa with provision of training, equipment, plasters and boots.

The clinic, staffed by the local hospital, treated 44 children and performed 31 tenotomies. The new Ampanihy clinic opened in November 2018 and trained staff are promoting the screening and treatment services to surrounding health clinics and villages. Eight children have been screened and two children treated with plasters and boots.

A total of 78 children had their clubfoot corrected through the ADFA clinics and the Clubfoot Coordinator in Tulear reported that parents were very appreciative of the service. “They said that we changed their children’s life by giving treatment and are grateful for having everything free from ADFA. They appreciate the help from the local staff which look after their children like their own.”

Gastroenterology
Two gastroenterology teams visited hospitals in Tulear and Antananarivo to provide training and medical assistance, and to monitor the six endoscopy units set-up by ADFA over the past eight years. Equipment in each unit was tested and maintained, and infection control improved by the creation of specific areas to clean scopes and equipment. Procedure Manuals were also updated and much-needed equipment and supplies were donated to each hospital to ensure the endoscopy units are maintained at a high level. The teams facilitated training for 73 specialists, technicians, and nurses; consulted 257 patients; and performed 284 endoscopic procedures, which also involved training specialists in the techniques. Doctors once again showed good progress in their endoscopic skills with demonstrated improved knowledge and technical ability. Dr Digby Cullen, Gastroenterology team leader, progressed planning for the building of an Endoscopy Centre, with site visits and meetings with management at the University Hospital in Antananarivo.

Urology
This program, led by Urologist, Dr Sue Chapman, has grown consistently since the first visit in 2009. Three well-organised teams, consisting of nine volunteers (urologists, theatre nurses and anaesthetists) from Bunbury and Ballarat, visited hospitals in Tulear and Antananarivo.

The teams conducted 191 consultations and performed 131 surgical procedures (52 children) with daily post-operative ward rounds. Following surgery, 51 patients are now living without a catheter, thereby reducing the health and financial burden on them and their families. Teaching continued with the local surgeons and this time included the evaluation and surgical treatment of LUTS/prostatic obstruction. Intensive training and supervision has been provided in both paediatric and adult surgery over the last few years and the surgeons’ skills are now at a very high level.

The provision of a diathermy machine, laparoscopy stack, yellow fin stirrups and patslide, along with staff training, will greatly improve the workplace ergonomics for surgeons and staff, and patient safety.

Medical Team Visits

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<th>Volunteers</th>
<th>35</th>
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<td>Locations</td>
<td>10</td>
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ADFA Medical Team Visits

1. Dr Kate Stannage at the new Ampanihy Clubfoot Clinic
2. 1. Clubfoot patient
   2. Clubfoot Training - New Ampanihy Clinic
Obstetrics and Gynaecology
Due to political unrest, Dr Lanziz Homar led a reduced team, with the major objective being capacity building through teaching and training for specialists, midwives, theatre nurses and medical students in Antananarivo and Tulear. Forty patients received consultations and an emergency caesarean and hysterectomy were performed on a patient who had travelled 7 hours in a public bus to the hospital with a ruptured uterus. Dr Homar took over her care as she was not able to pay for medical assistance and was going to be discharged. She required a blood transfusion but recovered well and was extremely grateful to ADFA for saving her life.

Otolaryngology (ENT)
In October 2018, ENT surgeon, Dr Latif Kadhim, completed a scoping study to assess the viability of establishing ENT services in Madagascar, particularly in Tulear. The renovation of the Department of Orthopaedic Surgery at the Centre Hospitalier de Soavinandriana (Cenhosoa) Hospital in Antananarivo was opened in June 2019 by the Australian Ambassador to Madagascar and the Minister of National Defence of the Republic of Madagascar. The orthopaedics department is located in a historic, 125 year old building and the project involved the refurbishment of the wards, offices, wet areas, ceilings, doors and window frames, and sealing the leaking roof. Support was provided by Australian Government funding through the Australian NGO Cooperation Program (ANCP) and the Australian Embassy Direct Aid Program (DAP). Refurbishing Ward B of the Orthopaedics and Traumatology Department at Centre Hospitalier Universitaire Joseph Ravoahangy Andrianavalona (HUJRA) in Antananarivo included upgrading the bathrooms and toilets; painting wards, corridors and offices; replacing damaged flooring and repairing windows; installing fire extinguishers in the corridors and lockers in the nurses station. These two renovation projects will improve anaesthetic procedures for all patients undergoing operations by both ADFA and the hospital surgical teams.

Infrastructure Development
Three infrastructure projects were completed during the year. A new clubfoot clinic was built in the grounds of the hospital in Ampanihy, with the Malagasy President laying the first stone. The clinic has been set up and furnished, and trained staff are providing an essential screening and treatment service to this remote area.

The conference provided the opportunity for Dr Tovo Harimanana Rabenanjary, who has been under the mentorship of gastroenterologist Dr Digby Cullen for many years, to attend the Singapore Hepatitis Conference.

Advanced Development
Planning is well underway for the building of an Endoscopy Centre at the main surgical and cancer hospital (CHUJRA), in Antananarivo in partnership with Madagascar’s Gastroenterology Association (AGEM). The Australian Embassy has awarded a grant towards building the unit which will provide a national centre of excellence in advanced treatments for patients with acute gut bleeding, cancer prevention and treatment, hepatobiliary disorders and surgical patients. It would also be a national training centre for endoscopy and research in gut diseases.

Acknowledgements
• Her Excellency Jenny Dee, Australian Ambassador to Madagascar, for her continued support of ADFA’s activities through program visits and the Direct Aid Program.
• Mr Tim Carstens and the Base Resources team for supporting ADFA’s activities in Madagascar.
• Mr Tom Revy and Mr Jean Luc Marquetoux from Black Earth Minerals for financial support for and oversite of the construction of the Clubfoot Clinic in Ampanihy.
• Air Mauritius for their continued support for extra weight allowance.
• St John of God Subiaco for its financial support of ADFA’s activities through program visits and the Direct Aid Program.
• Mr Jules le Clezio for his continued support for extra weight allowance.
• Australian Government through the Australian NGO Cooperation Program (ANCP) and the Direct Aid Program (DAP).

Australian Doctors for Africa
2019 Annual Report

Infrastructure Development
Two sea containers and four air freight pallets of equipment and supplies complemented the renovations. ADFA purchased an anaesthetic machine for Clinique St Luc in Tulear and Dr Hock Tan (volunteer anaesthetist) installed it and provided extensive training to the anaesthetic technician.

This will improve anaesthetic procedures for all patients undergoing operations by both ADFA and the hospital surgical teams.

Advanced Development
Planning is well underway for the building of an Endoscopy Centre at the main surgical and cancer hospital (CHUJRA), in Antananarivo in partnership with Madagascar’s Gastroenterology Association (AGEM). The Australian Embassy has awarded a grant towards building the unit which will provide a national centre of excellence in advanced treatments for patients with acute gut bleeding, cancer prevention and treatment, hepatobiliary disorders and surgical patients. It would also be a national training centre for endoscopy and research in gut diseases.

Support was provided to Dr Tovo Harimanana Rabenanjary, who has been under the mentorship of gastroenterologist Dr Digby Cullen for many years, to attend the Singapore Hepatitis Conference. The conference provided the opportunity for Dr Tovo to improve his knowledge and understanding of hepatology which he can now share with his colleagues in Madagascar.
Orthopaedic instrument sets purchased through Sign Fracture Care International (SIGN), an NGO who partners with hospitals and surgeons to improve orthopaedic outcomes. SIGN asks that surgeons using their equipment report their patient cases through the SIGN Surgical Database. This data assists in improving and adapting tools and techniques in order to provide better results. Both surgeons are extremely grateful for the instrument sets which support them in providing better outcomes for orthopaedic patients in Hargeisa.

**Clubfoot**

ADFA is extremely grateful for our well established and successful partnership with Diversity Action Network (DAN). DAN manages the Clubfoot Program in Somaliland which consists of a main clinic in the capital Hargeisa and outreach clinics in Berbera, Burao and Borama. The level of expertise, experience and professionalism in the screening and treatment of clubfoot is extremely high and is supported through ongoing training and mentoring from ADFA Clubfoot manager Dr Kate Stannage. Since his return to Hargeisa in January 2019, after completing specialist training in Ethiopia, ADFA trained surgeon and scholarship recipient Dr Ahmed is now able to treat children requiring a tenotomy at Hargeisa Group Hospital. This provides a convenient service for families, with Hargeisa Group Hospital located only 200m away from the clubfoot clinic. Throughout the year, 58 children were screened for clubfoot with 33 fitted with braces and 10 requiring a tenotomy.

**Scholarships**

In the 2018/2019 financial year, ADFA provided scholarships to 6 Somaliland doctors to assist with living costs whilst they complete specialist training in Ethiopia. In January 2019, the first two doctors completed their orthopaedic specialist training and returned to Somaliland as the country’s first orthopaedic surgeons. The remaining doctors are continuing their training in the areas of orthopaedics and general surgery. On completion, the recipients have made a commitment to return to Somaliland which will improve patient outcomes, reduce waiting lists and build capacity in the Somaliland health system.
SOUTH SUDAN
ADFA conducted a scoping study in Juba several years ago, centred on orthopaedic and traumatology development. Since then, South Sudan has become the world’s newest, independent country.
ADFA, in association with AO Alliance Foundation, are providing living and accommodation scholarships for three South Sudanese doctors who are in their third year of orthopaedic specialist training in Ethiopia. On completion they will return to Juba to work at the Government Hospital.

ERITREA
Following the encouragement of the Australian Ambassador in Cairo, ADFA CEO Dr Graham Forward carried out a scoping study in Asmara in April 2019.
Several meetings with Hon. Amina Nurhussein, Minister of Health; meetings with doctors and surgeons at the Hailbeet National Referral Hospital; site visits; and assessment of infrastructure and logistical challenges resulted in a plan for cooperation to develop orthopaedic and traumatology services in Asmara. A Memorandum of Understanding is being developed to enable this project to proceed.

MAURITIUS
ADFA teams have been invited by the Australian High Commission to develop a project to support surgical teaching and training in Mauritius whilst in transit to Madagascar. Dr Digby Cullen, Dr Graham Forward and Dr Latif Kadhim have met with the Mauritian Medical Council. A combined seminar to share developments in Australian and Mauritian specialties is planned for the second half of 2019.
Australian Doctors for Africa is a proprietary limited company with two Directors, Dr Graham Forward and Mr John Bond. The overall management of Australian Doctors for Africa, however, is entrusted to the Board of Management. The organisation has appointed a voluntary Chief Executive Officer (Dr Graham Forward) and two part-time paid administrators (1.5 FTE). The current Chair of the Board of Management is Mr John Bond, a prominent local, national and international businessman.

During 2018-19 the Board of Management comprised:

- Mr John Bond, Chair;
- Dr Graham Forward, the Founder and CEO;
- Mrs Christine Tasker, Trips and Administration;
- Mr Ian Pawley, Finance;
- Dr Kate Stannage, Clubfoot Manager; and
- Mr Graeme Wilson, Logistics.

Each brings business acumen and experience to the organisation through their financial, business, logistic, administrative and organisational skill sets and provide their services on a voluntary basis. The Board of Management met on ten occasions throughout the year and at the Annual General Meeting in November 2018 the Board of Management was re-elected. Throughout the year, the organisation has built upon the solid framework of policies, processes and procedures to foster a culture of strong governance and compliance. The internal systems of management are now well established and implemented by an experienced team in the office.

The Board has ensured that the implementation of the Strategic Plan has continued so that the vision, mission and strategic priorities have been focused and monitored; overseen their execution through planning sessions and submissions; approved budget requirements; determined policies and procedures for ethical behaviour, integrity and respect for others; reviewed policies when required; outlined roles and responsibilities for internal and external personnel; overseen adherence to ANCP, ACFID and DFAT regulations and guidelines; and monitored the performance of the medical teams. The Strategic Plan 2018-22, adopted by the Board in November 2017, has been paramount in guiding the organisation to achieve outcomes in the locations in which it serves.

I have been visiting Ethiopia for two weeks in August yearly since 2006. When I first visited the Black Lion Hospital in Addis Ababa the wards and operating theatres were grim. The orthopaedic pathology was certainly extreme. Over the years with the extensive training and infrastructure input of ADFA there has been an amazing improvement in all aspects of the standard of orthopaedic care. I consider myself very privileged to have visited Ethiopia on so many occasions and to have had the opportunity to make a small contribution to orthopaedic teaching and service provision.

I have been very fortunate to be accompanied by great ADFA team members, particularly Paul Maloney, Orthopaedic Technician, Stephanie McDonald, Operating Theatre Nurse and in the early years Victoria Gibson, Operating Theatre Nurse.

I am also very pleased to have developed friendships with some of the local orthopaedic surgeons at the Black Lion Hospital. In the past few years I have also visited hospitals in Bahir Dar and Hossana.

"I look forward to continuing my association with ADFA and contributing to the further improvement of orthopaedic services in these regional centres."
Dr Graham Forward has been the driving force behind Australian Doctors for Africa since the first official medical team arrived in Somalia in February 2005. Bringing a wealth and mix of business and medical acumen to the organisation, Graham’s standing with the orthopaedic community both in Western Australia, Australia and internationally has enabled the growth of medical missions and capacity building projects to continue to increase.

Since completing medical training at The University of Western Australia and subsequent postgraduate training in Orthopaedics, Graham has worked as an orthopaedic surgeon in Western Australia in both the private and public sectors, including indigenous communities in Broome, Derby and Christmas Island.

Graham has numerous recognition awards for his humanitarian endeavours and has held various medical positions within the Australian Orthopaedic Association Western Australia.

John Bond is a founding Director of Primewest, a national property investment business and has been instrumental in its growth and development over the last twenty years. His background spans law, investment banking as well as property investment and development. He holds board and equity positions in a range of companies in diverse sectors including Lexus of Perth, Energy-Tec and Core Vision.

He holds degrees in Law and Commerce from The University of Western Australia and is a Corporate Member of the Property Council. He is Chairman of The Fathering Project, a non-for-profit organisation focusing on the importance of a father figure in children’s lives, and he is also a board member of the Art Gallery of Western Australia Foundation.

John has been a supporter of, and passionate about ADFA since visiting Ethiopia with Graham Forward and witnessing first hand the tremendous impact it has on the lives of local people and has been Chair of the ADFA Board since February 2016.

Christine Tasker has held the position of Practice Manager and Personal Assistant to Dr Graham Forward, founder of ADFA since 1993. Christine is an inaugural member of the Board of Management and managed the administration of ADFA on a voluntary basis for 9 years leading up to ADFA’s first employee.

Christine’s nursing background, combined with her exceptional administrative and management skills makes her well qualified in her roles as Operations Manager, Financial Controller and Trip Coordinator for volunteer overseas medical teams, having organised and sent 138 teams to date. She upholds the governance and compliance required for the running of ADFA and was involved in the accreditation processes ADFA has undertaken with DFAT, ACFID and overseas country partners. She remains proactive in her involvement in fundraising having led the team in a very enjoyable and successful cocktail party held in February 2019 which raised over $30,000 for ADFA.

Ian Pawley has an Honours degree in Economics from London University and has had a distinguished career in Business and Education at universities, high schools and senior colleges including Curtin University and The University of Western Australia.

Ian brings a varied and accomplished business background with over 20 years’ experience as Executive Director of a successful building company.

Ian joined ADFA in 2009 and was invited to join the Board in 2011. He has been assisting ADFA in financial management and in achieving and maintaining DGR status and DFAT accreditation. He is looking forward to the challenges of sustaining ADFA’s unique position as a high quality charity and its wonderful record of assisting people in Africa.

Graeme Wilson brings to the board a wealth of experience in shipping, transport and logistics. Graeme was a director of a renowned WA shipping company and brings a broad spectrum of experience having been involved in all facets of the logistic chain from operations, sales and management.

Graeme is the Chair of the WA Port Operations Task Force, a 30-year industry group who work towards improving the logistic chain through the port of Fremantle and hinterland.

Graeme has held a number of positions and until recently was a member of the Freight and Logistics Council of WA. Currently Graeme is working with the Westport Taskforce being the state government initiative looking at the developments in the outer harbour and Fremantle.

Graeme joined the ADFA Board in January 2014. From 2008 Graeme has been involved with voluntary coordination of the shipping and logistics of ADFA medical equipment to Somalia, Ethiopia, Comoros and Madagascar.

With his extensive business background and logistics knowledge he is keen to continue and develop the excellent and progressive work ADFA is undertaking for the people in Africa.

Dr Kate Stannage is a Paediatric Orthopaedic Surgeon who has been working with Australian Doctors for Africa since 2012.

Currently she is Head of Department of Orthopaedic Surgery at the Perth Children’s Hospital and President of the Australian Paediatric Orthopaedic Society. Kate sits on the AOA WA Executive, Orthopaedic Women’s Link and Regional Training committees. She lectures at both Notre Dame University and The University of Western Australia and conducts research in the field of neuromuscular morphology and function. She has previously spent time volunteering and teaching in the Solomon Islands, and currently teaches with the Pacific Islands Orthopaedic Association.

In 2018 Kate was the recipient of the Award for Excellence in Women’s Leadership for Western Australia. Kate joined the Board of Management in 2016. She has been instrumental in establishing a clubfoot screening and treatment program in Madagascar and Somalia, and as a member of the Board is responsible for establishing, expanding and maintaining clubfoot programs in all countries in which ADFA is currently active.

The Department of Foreign Affairs and Trade (DFAT) is the Australian Government agency responsible for managing Australia’s overseas aid program. The aim of the Australian Aid program is to promote Australia’s national interests through contributing to international growth and poverty reduction. Australian Doctors for Africa is the only Western Australian based NGO with DFAT accreditation.

Australian Doctors for Africa is a proud member of the Australian Council for International Development (ACFID) and is a signatory to the ACFID Code of Conduct, which is a voluntary, self-regulatory sector code of good practice. ADFA is fully committed to the Code which requires members to meet high standards of corporate governance, public accountability and financial management. More information on the Code, including how to make a complaint, can be obtained from ACFID by visiting www.acfid.asn.au or emailing code@acfid.asn.au.

ADFA also has a process for handling complaints which can be activated by phoning 08 6479 8961 or emailing the CEO at admin@ausdocafrica.org.

ADFA is also endorsed as an income tax exempt charitable entity and endorsed as a Deductible Gift Recipient under the Income Tax Assessment Act 1997.
The Conscie Financial Report is an extract from the Financial Statements and has been prepared in accordance with AASP 1029 and the requirements set out in the ACFID Code of Conduct. For further information on the Code please refer to the ACFID website www.acfid.asn.au.

The financial statements and specific disclosures included in the Conscie Financial Report cannot be expected to provide as full an understanding of the financial performance, financial position and finance and investing activities of the company as the Financial Statements. Further financial information can be obtained from the Financial Statements which is available free of charge on the Australian Doctors for Africa website www.ausdocafrica.org.

During the 2019 financial year, Australian Doctors for Africa had no transactions for international political or religious proselytisation programs.

The Conscie Financial Report includes both cash and non-cash income and expenditure as required by all Department of Foreign Affairs and Trade (DFAT) accredited NGOs. The value of non-cash items is calculated in accordance with guidelines set by DFAT.

The financial reports reflect another successful year delivering advanced development programs in our target countries. I draw attention to the following:

**Special Purpose Financial Statements**

During the 2019 financial year, the Board of Management agreed that Australian Doctors for Africa is a non-reporting entity and financial reports should be presented as Special Purpose Financial Statements.

**Income Tax**

The company is a registered charity under the Chantble Collections Act 1964 (License No. CC20679) and is exempt from income tax.

**FBT Exemption**

The company is a Public Benevolent Institution endorsed to access fringe benefits tax exemption.

**Grants and Donations**

Grants which have specific performance obligations attached to them are initially recognised as a liability and subsequently reclassified as Revenue when the performance obligations are met. Grants which do not have sufficiently specific performance obligations are recognised when the entity obtains control over the funds, which is generally at the time of receipt.

**Non Monetary Donations**

Non monetary donations make up a substantial proportion of the company’s income and expenditure for 2019, a total of $1,276,861 (2018: $954,899). Non monetary donations of medical equipment and supplies are valued according to a written policy adopted by the Board of Management. Donated services such as airline flights and freight are valued at current cost. Voluntary labour is based on rates determined by the Department of Foreign Affairs and Trade.

**Our strong financial position will enable us to maintain our current programs and continue expanding new projects. Our low administration and fundraising costs allow us to ensure the maximum amount of supporter donations are allocated to direct program delivery, assisting those most in need in Africa.**

**DR GRAHAM FORWARD**

Founder and CEO

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**STATEMENT OF CHANGES IN EQUITY**

**For the Financial Year Ended 30 June 2019**

<table>
<thead>
<tr>
<th>2019 ($)</th>
<th>2018 ($)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Opening Equity</td>
<td>1,521,763</td>
</tr>
<tr>
<td>Transfer to Asset Revaluation Reserve</td>
<td>483,940</td>
</tr>
<tr>
<td>Net Surplus for the Year</td>
<td>(242,841)</td>
</tr>
<tr>
<td><strong>CLOSING EQUITY</strong></td>
<td>1,741,802</td>
</tr>
</tbody>
</table>

---

**STATEMENT OF COMPREHENSIVE INCOME**

<table>
<thead>
<tr>
<th>2019 ($)</th>
<th>2018 ($)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>REVENUE</strong></td>
<td></td>
</tr>
<tr>
<td>Donations and Gifts</td>
<td></td>
</tr>
<tr>
<td>Monetary</td>
<td>266,712</td>
</tr>
<tr>
<td>Non Monetary</td>
<td>1,276,861</td>
</tr>
<tr>
<td>Grants</td>
<td></td>
</tr>
<tr>
<td>Department of Foreign Affairs and Trade</td>
<td>226,619</td>
</tr>
<tr>
<td>Australian Grants</td>
<td>152,099</td>
</tr>
<tr>
<td>Foreign Exchanges Profit (Loss)</td>
<td>(5,761)</td>
</tr>
<tr>
<td>Investment Income</td>
<td>183,435</td>
</tr>
<tr>
<td><strong>TOTAL INCOME</strong></td>
<td>2,855,846</td>
</tr>
<tr>
<td><strong>EXPENDITURE</strong></td>
<td></td>
</tr>
<tr>
<td>International Programs</td>
<td></td>
</tr>
<tr>
<td>Funds to International Programs</td>
<td>638,343</td>
</tr>
<tr>
<td>Program Support Costs</td>
<td>82,960</td>
</tr>
<tr>
<td>Community Education</td>
<td></td>
</tr>
<tr>
<td>Fundraising Costs</td>
<td></td>
</tr>
<tr>
<td>Public</td>
<td>387</td>
</tr>
<tr>
<td>Accountability and Administration</td>
<td>180,827</td>
</tr>
<tr>
<td>Non Monetary Expenditure</td>
<td>1,276,841</td>
</tr>
<tr>
<td><strong>TOTAL INTERNATIONAL DEVELOPMENT PROGRAMS EXPENDITURE</strong></td>
<td>2,855,847</td>
</tr>
<tr>
<td>Surplus (Deficit) from Ordinary Activities</td>
<td>(242,841)</td>
</tr>
</tbody>
</table>

---

**STATEMENT OF FINANCIAL POSITION**

<table>
<thead>
<tr>
<th>2019 ($)</th>
<th>2018 ($)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>ASSETS</strong></td>
<td></td>
</tr>
<tr>
<td>Current Assets</td>
<td></td>
</tr>
<tr>
<td>Cash</td>
<td>504,957</td>
</tr>
<tr>
<td>Current Tax Assets</td>
<td>64,041</td>
</tr>
<tr>
<td>Total Current Assets</td>
<td>569,098</td>
</tr>
<tr>
<td>Non Current Assets</td>
<td></td>
</tr>
<tr>
<td>Other Financial Assets</td>
<td>562,849</td>
</tr>
<tr>
<td>Property, Plant and Equipment</td>
<td>2,575</td>
</tr>
<tr>
<td>Total Non Current Assets</td>
<td>569,444</td>
</tr>
<tr>
<td><strong>TOTAL ASSETS</strong></td>
<td>1,798,143</td>
</tr>
<tr>
<td><strong>LIABILITIES</strong></td>
<td></td>
</tr>
<tr>
<td>Current Liabilities</td>
<td></td>
</tr>
<tr>
<td>Payable</td>
<td>25,407</td>
</tr>
<tr>
<td>Provisions</td>
<td>16,974</td>
</tr>
<tr>
<td>Total Current Liabilities</td>
<td>42,381</td>
</tr>
<tr>
<td><strong>TOTAL LIABILITIES</strong></td>
<td>42,381</td>
</tr>
<tr>
<td><strong>EQUITY</strong></td>
<td></td>
</tr>
<tr>
<td>Contributed Equity</td>
<td>2</td>
</tr>
<tr>
<td>Asset Revaluation Reserve</td>
<td>1,074,800</td>
</tr>
<tr>
<td>Retained Surplus</td>
<td>1,741,802</td>
</tr>
<tr>
<td><strong>TOTAL EQUITY</strong></td>
<td>1,741,802</td>
</tr>
</tbody>
</table>
Financial Overview

The income and expenditure totals shown below are taken from the Concise Financial Report. The ratios have been calculated as the total income or expense category (e.g. ‘Donations and Gifts’) as a percentage of total income or expenditure.

WHERE THE MONEY CAME FROM*

<table>
<thead>
<tr>
<th>Category</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Donations and Gifts</td>
<td>288,712</td>
</tr>
<tr>
<td>Investment Income</td>
<td>103,436</td>
</tr>
<tr>
<td>Dividends from current investments</td>
<td></td>
</tr>
<tr>
<td>Department of Foreign Affairs and Trade</td>
<td></td>
</tr>
<tr>
<td>Other Grants</td>
<td></td>
</tr>
<tr>
<td>Grants from The Very Good Foundation</td>
<td></td>
</tr>
<tr>
<td>Basson Sarcoma Foundation</td>
<td></td>
</tr>
<tr>
<td>Value of donated time, equipment</td>
<td>1,276,861</td>
</tr>
<tr>
<td>Other Australian Grants</td>
<td>112,000</td>
</tr>
<tr>
<td>FOREIGN EXCHANGE PROFIT (LOSS)</td>
<td>(5,781)</td>
</tr>
</tbody>
</table>

TOTAL: $2,055,346

HOW THE MONEY WAS SPENT*

<table>
<thead>
<tr>
<th>Category</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>International Programs</td>
<td>2,101,204</td>
</tr>
<tr>
<td>Program delivery in Ethiopia, Madagascar, Somaliland and Comoros, including training, medical services, logistics and freight costs and non monetary expenditure.</td>
<td></td>
</tr>
<tr>
<td>Program Support Costs associated with program</td>
<td>82,940</td>
</tr>
<tr>
<td>Administration and Accountability</td>
<td>100,807</td>
</tr>
<tr>
<td>*Not Shown: Fundraising Costs</td>
<td>112,000</td>
</tr>
</tbody>
</table>

TOTAL: $2,298,827

*Not Shown: Fundraising Costs $7,876

Report on the Concise Financial Reports

I have audited the concise financial report of Australian Doctors for Africa Pty Ltd for the year ended 30 June 2019 as contained in the 2019 Annual Report which has been prepared in accordance with the ACFID Code of Conduct and Implementation Guidance and other statutory requirements. The concise financial report is an extract from the full financial report.

Directors’ Responsibility for the Financial Report

The Directors are responsible for the preparation and fair presentation of the financial reports in accordance with Australian Accounting Standards, the Australian Charities and Not-for-profits Act 2012 and Regulation 2013 and the ACFID Code of Conduct and Implementation Guidance and for such internal control as the governing body determines is necessary to enable the preparation of the financial reports that are free from material misstatement, whether due to fraud or error.

Auditor’s Responsibility

My responsibility is to express an opinion on the financial reports based on my audit. I conducted my audit in accordance with Australian Auditing Standards. Those standards require that I comply with relevant ethical requirements relating to audit engagements and plan and perform the audit to obtain reasonable assurance about whether the financial reports are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial reports. The procedures selected depend on the auditor’s judgement, including the assessment of the risks of material misstatement of the financial reports, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity’s preparation and fair presentation of the financial reports in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity’s internal control. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of accounting estimates made by the Directors as well as evaluating the overall presentation of the financial reports.

I believe that the audit evidence I have obtained is sufficient and appropriate to provide a basis for my audit opinion.

Opinion

In my opinion, the concise financial reports present fairly, in all material respects, the financial position as at 30 June 2019 and the financial performance for the year then ended in accordance with Australian Accounting Standards, the Australian Charities and Not-for-profits Act 2012 and Regulation 2013 and the ACFID Code of Conduct and Implementation Guidance and comply with AASB 1039 Concise Financial Reports and Division 60 of the Australian Charities and Not-for-profits Act 2012 and Regulation 2013.

Emphasis of Matter

I draw attention to Note 1 to the detailed financial report which describes the revenue recognition policy. My opinion is unmodified in respect of this matter.

Auditor Independence Declaration

In conducting my audit, I have complied with the independence requirements of the Corporations Act 2001.

Lesley McKay CA

Chartered Accountant & Registered Company Auditor

Independent Auditor’s Report to the members of Australian Doctors for Africa Pty Ltd

11 October 2019
ADFA acknowledges the support of the Australian Government through the Australian NGO Cooperation Program (ANCP) and Direct Aid Program.

We are extremely grateful to the Emirates Airline Foundation who has supported ADFA through complementary air travel for medical teams travelling to Ethiopia and for excess baggage weight for medical supplies.

Air Mauritius for their continued support in providing excess baggage for medical team visits to Madagascar.

Peter Connor and the team from Snap Printing West Perth have supported ADFA with donated printing services.

Since ADFA’s inception, Primewest has continued to financially support the organisation.

Bases Resources has supported ADFA in Madagascar through project management, transport, translators and executive support services.

BlackEarth Minerals has supported ADFA in Madagascar through program support.

For their financial support which has enabled many projects to be fulfilled.

Travel arrangements through Peter Davis from the Travel Associates Australia.

Financial assistance and pharmacy products for our programs in Madagascar.

For all their extraordinary assistance storage and logistics.

WE ALSO HAVE STRONG ADVOCACY AND IN-KIND SUPPORT FROM:

Chilli
Design and production of Annual Reports

LESLEY MCKAY
Chartered Accountant and Registered Auditor

DAVID HEWITT & CO
Accounting and Financial Services

PRINT IMPACT
Printing services support

ROYAL WOLF
Logistics assistance

MAX NELSON
Videographer

FINANCIAL SUPPORT FROM:

Ausplow Pty Ltd
Avant
Camellia Entertainment
Dawn Crest Holdings
Maca Mining
Mutual Investments Pty Ltd
Old Money Pty Ltd
Rotary Clubs of Dalkeith and Booragoon
Sock It To Sarcoma
Southcare Lifecare Physiotherapy
The Very Good Foundation
Uechtritz Foundation
and many other private and corporate donations.

MEDICAL EQUIPMENT AND SUPPLIES DONATED BY:

3M
Aaxis Pacific
Ansell
Boston Scientific
BSN Medical
Carl Zeiss Pty Ltd
Clinicalabs
Cook Australia
Cosmedex
DKF Foundation
GE Healthcare
Johnson & Johnson
Karl Storz
Matrix Surgical
Mediwnn
Madtronic
Nell Gray Fashions
Olympus
Parkerville Craft Group
Smith & Nephew
Spotless
Stryker
Western Biomedical
Zimmer Biomet
and many public and private hospitals.

AND MANY OTHER PRIVATE AND CORPORATE DONATIONS.