

ANNUAL REPORT 2019/20





PDG Harold Sharp OAM

Chair

Chair's Report

It was with great humility that, at the Annual General Meeting of ROMAC held in September 2019 in Christchurch, New Zealand, I accepted the invitation of the Board of ROMAC to take on the position of the Chair.

It is a great honour to lead ROMAC in its 33rd year of operation, knowing of the unbelievable work that has been carried out by Rotarians and medical practitioners in Australia and New Zealand in a voluntary capacity, with no paid staff and minimal fixed costs. Their efforts have allowed in excess of 500 patients under the age of 15 years from our neighbouring Oceania Islands to be given, in some instances, life-saving surgery and the chance to return to their homeland with the opportunity to lead a normal life.

I would be remiss not to acknowledge the outstanding work, firstly as a volunteer and then as an executive, of past Chair Rob Wilkinson. Rob has been involved in ROMAC since 2004 and has held positions of volunteer supporter, District Chair, Regional Chair, Deputy Chair and finally Chair in 2016-2019. I know that I speak on behalf of all who have worked with him and the many patients with whom he has been involved, in Australia and New Zealand, in extending a giant thank you to Rob for his commitment and dedication to ROMAC.

It was with great sadness we learnt that ROMAC Past Communications Chair, Rotarian Chris Joscelyne, passed away in

late June after a long illness. Our thoughts are with his family and friends. His counsel and advice will be greatly missed.

The last 12 months have presented many challenges in communicating with Rotary clubs, bringing in patients from overseas and then returning them home. We encountered floods, bush fires and then the arrival of the COVID-19 pandemic, which has changed the lives of all of us. Many avenues for us to visit Rotary clubs immediately shut down, but fortunately, many more have opened in ways we never would have imagined before the pandemic. The creating of a 10-minute video about ROMAC and being allowed to join Zoom meetings to show the video and then answer questions was a wonderful alternative.

Sadly however, because of the lack of ability for Rotary clubs to fundraise through BBQ's, golf days, monthly markets etc., our revenue for the year is well down on budget. The coming 12 months will also be challenging, but the ROMAC team is now better prepared, and I am confident we will face all challenges in a positive manner.

Finally, my sincere thanks go to my Board Members, Regional Chairs, District Chairs, the Operations Team, Medical Adviser and Medical Consultants, the Communications and Social Media Team, and our many hard working Volunteers who, under great pressure, performed over and above the call of duty.

Contents	Pg
Chair's Report	2
Medical Director's Report	3
Treasurer's Report	4
Operations Director's Report	5
Patient Information	5-6
Marketing Communications' Report	7
Regional Chairs' Reports	8-14
Sponsors	14
Who's Who at ROMAC	15



Dr Larry Roddick

Medical Director

Medical Director's Report

Although it is my privilege to bring you this report, I am also disappointed as the COVID-19 pandemic has played havoc with ROMAC's program, as it has done everywhere.

ROMAC treats children from Oceania, who are unable to have surgery in their home country (primarily PNG, Timor Leste, Fiji, Vanuatu and the Solomon Islands). We only treated 8 children this year, compared to 25 last year. The borders are closed and I suspect they will, unfortunately, still be when the next annual report is written.

If we have an “upside” to the pandemic, it is that ROMAC can reset its finances. Every dollar raised comes from Rotarians and their clubs and we have no other financial sources, unlike some other charities. The combination of the prolonged drought, the expansive bushfires and the COVID-19 devastation have together heavily impacted all Rotary fundraising.

The cost of managing a child's treatment has rapidly risen in the recent past. ROMAC only treats children who are unable to have surgery in their home country, so we are charged the “international fee” by the Australasian paediatric public hospitals.

It now costs \$6,000 a day for the child to be in an Intensive Care Unit (ICU). ROMAC children regularly fall into this group as children requiring cardiac surgery all need post-operative care in ICU. A recent patient spent 8 nights in ICU. The \$6,000 is the

cost for the bed alone and does not cover other expenses including X-rays, scans, CTs, MRIs and blood tests.

However, closing a child's hole in the heart will drastically change the child's future. Following successful surgery, the child can expect a normal life. Without surgery, the child at about 30 will probably become significantly incapacitated with heart failure. Thus \$60,000 buys health care which can dramatically change a child's future! It behoves ROMAC to wisely spend the money raised by Rotarians so that we can give the best value to as many children as possible rather than spending on only one or two. Consequently, triaging children is essential to ensure money is spent efficiently.

I hope it will not be long until we can resume ROMAC's program, but realistically, there is probably going to be a prolonged delay. Thank you all for your ongoing generous support of ROMAC.



Above: Two-month-old Vincent from the Solomon Islands who arrived in Australia requiring urgent surgery to correct a blockage between his oesophagus and his stomach.



Michael Carrigan

Treasurer

Treasurer's Report

submit my report as Treasurer of ROMAC for the financial year ended 30th June 2020 (FY19/20).

The overall result was a deficit of \$102,752 compared to a deficit of \$239,715 in the preceding financial year. The loss for the year includes a “book write down” of \$84,053 on the entity’s share portfolio which has been impacted by the flow on effects from the COVID-19 pandemic. Over time there is an expectation that the value of the portfolio will recover.

Donations from Rotary Clubs within Australia this financial year have also been impacted by COVID-19. They totaled \$278,843 compared to \$403,097 in the preceding year. A total of 134 clubs made financial contributions. In FY18/19, 176 clubs supported ROMAC and in FY17/18, it was 206. While a reduction in donations this year is explicable, the downwards trend in the number of clubs supporting ROMAC is, nevertheless, a worrying sign. Other donations and bequests totaled \$132,459 compared to \$157,114 in the 2018/19 year. ROMAC is indebted to those individuals and organisations that contribute year after year.

In summary, total donations were \$411,302 compared to \$560,211 in FY18/19 and \$740,556 in the FY17/18 year.

Excluding the write down in value of the entity’s share portfolio, income from investments this year totaled \$68,790

compared to \$98,247 in the preceding year. The major contributors to a decline in investment income included the current low interest environment and a lower level of dividends received. Current indications are that there will be a further decline in income from investments in the 2020/21 financial year.

Indirect costs for the year totaled \$79,576 compared to \$49,861 in FY18/19.

The ROMAC Board and Operations Committee’s long term stated desire is that income from investments should be sufficient to cover the organisation’s indirect (non-medical) costs. Having regard to the current state of the Australian economy, the outlook of the investment climate indicates that this objective may need to be revisited.

Medical costs this year totaled \$419,215 compared to \$848,313 last year. The decline is directly attributable to a reduction in the number of cases treated during the year.

As I have reported previously, a great deal of effort is put into assessing cases prior to their acceptance and many of the medical costs are discounted either by the treating hospital or by the treating medical specialists providing their time on a pro bono basis. However, there is an ever-present danger that, due to complications or unforeseen circumstances, there will be a “blow out” in one or more cases which could have a significant financial drain on reserves. The ROMAC Board is focused on minimising the risk of this occurring.

Finally, I would like to thank all those clubs and individual Rotarians and non-Rotarians that contributed to the support of ROMAC during the past 12 months. The continued and increasing support of Rotary Clubs and Rotarians is critical to the ongoing operations of ROMAC.



Judy Holland

Operations Director

Operations Director's Report

I joined the ROMAC team as the Operations Manager in March 2019, but I was asked to join the ROMAC Board in April 2020. It is with great pleasure that I present my first report as Operations Director.

This year has been difficult due to the COVID-19 pandemic, which has meant we have had to suspend all treatment and medical relief for the children who had been approved for treatment, bar eight.

Despite this unfortunate situation, we are actively using this time to review our operations policies and procedures, to keep these in line with current trends and our legal and medical responsibilities. This will ensure that, when circumstances change, we will be ready to undertake medical treatment for ROMAC patients.

My learning curve has been steep but this has been made much easier by the past Operations Director, Carol Bourne, and the ever helpful and dedicated Regional Chairs and their teams. The Regional Committees consist of volunteer Rotarians who assist our patients with transport to medical appointments and arrange interpreters, support and care for accompanying family. They liaise with host families and provide the post-operative support and connection including social outings, for not only the patient but also the family support network. I thank them all.

There are many others who provide Operations with what we need to carry out our work. Our Medical Director, Dr Larry Roddick, is pivotal to the treatment of each child and I am grateful for his dedication, professional advice and support. I thank all the dedicated medical professionals in the Oceania region, who provide us with referrals, advice, follow-up for medical treatment, and support.

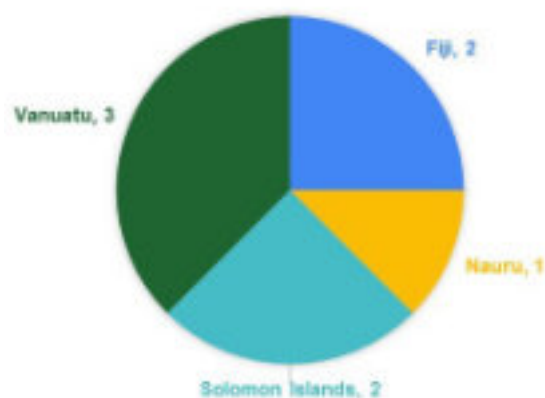
Operations could not do its job without the support of Rotary Clubs and individuals in Australia and New Zealand through their donations.

In these troubled times, I feel fortunate to have as our leader Mr Harold Sharp OAM, who brings a world of expertise to the Board, with his experience as a past district governor and in fund raising.

Patient Information

ROMAC Cases for 2019/20

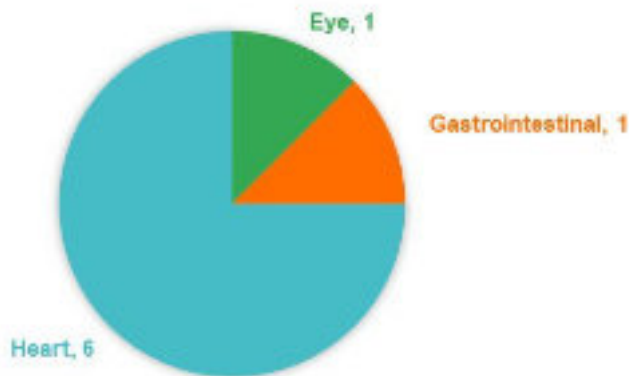
Source Countries



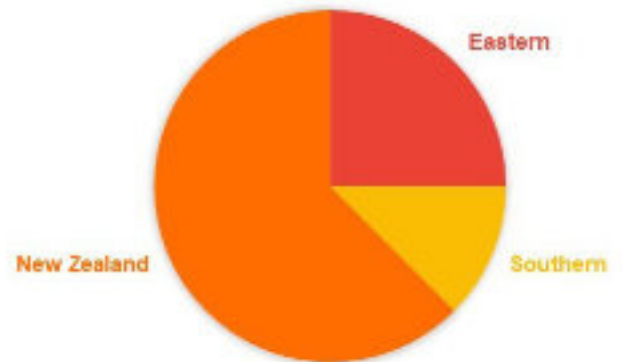
Patient Information

ROMAC Cases for 2019/20 continued

Surgical Treatment

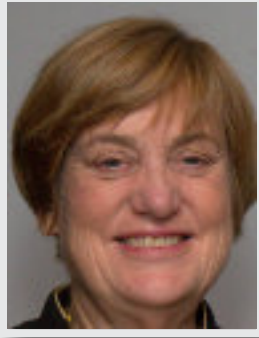


Treating Regions



ROMAC Patients for 2019/20

Patient Name	Birth Year	Status	Country	Region	Condition	Hospital	Rotary Club
Guardian	2014	COMPLETED	Nauru	Southern	Eye	Ballarat	Alfredton
Jasminah	2018	COMPLETED	Vanuatu	New Zealand	Heart	Starship	Browns Bay
Ben	2017	COMPLETED	Vanuatu	New Zealand	Heart	Starship	Downtown
Mariana	2017	COMPLETED	Vanuatu	New Zealand	Heart	Starship	Henderson
Viliame	2015	COMPLETED	Fiji	New Zealand	Heart	Starship	Milford
Gabriella	2019	COMPLETED	Fiji	New Zealand	Heart	Starship	Henderson
Germaine	2008	COMPLETED	Solomon Islands	Eastern	Heart	Westmead	Sutherland
Vincent	2019	CURRENT	Solomon Islands	Eastern	Tracheo-oesophageal Fistula	Canberra	Gungahlin



Gina Growden

Communications
Coordinator

*Communications
Report*

As with any not-for-profit organisation ROMAC’s success or failure depends, to a large extent, on the effectiveness of its communications. Spreading the word about what ROMAC does, and how the organisation operates is critical to encourage new supporters to get involved and to ensure that current volunteers and donors continue their vital support.

Without the ongoing financial contributions from Rotary Clubs and individuals in Australia and New Zealand, ROMAC would not be able to continue to operate, and keeping our supporters informed and hence more likely to make a financial contribution, has been of paramount importance this past year.

A new brochure encouraging individuals to become a **ROMAC Friend**, which involves making an annual donation of \$100, was created and distributed to Rotarians during club visits.

The development of a 10-minute promotional video on ROMAC also proved to be a great resource for Regional and District Chairs when giving presentations to clubs. This was especially the case when many clubs switched to virtual meetings due to the onset of COVID-19 and were receptive to the idea of an on-line presentation on ROMAC via Zoom. As a result, it was possible for presentations to be made to clubs in isolated locations not readily

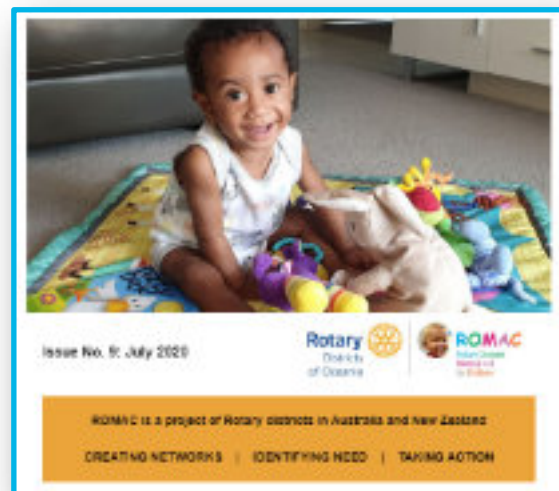
accessible for face-to-face meetings. Many of these clubs had not had a ROMAC presentation for many years.

Regular E-Newsletters and bulletins have been distributed electronically throughout the year and, with the inclusion of all Club Presidents in Zone 8, the communications database is now around 5,000 people.

Social media platforms, and especially Facebook, have continued to be a valuable source of disseminating information, but because COVID-19 restricted the number of patients treated during the year, the number of posts was correspondingly less than in recent years.

The ROMAC website www.romac.org.au has also continued to be an important communications tool providing information for those involved in the organisation and those seeking to learn more about what we do and how we operate. The site is easy to navigate, is bright and colourful and full of success stories of ROMAC patients.

Our sincere thanks go to Maggie Alexander for her untiring efforts in keeping the website up-to-date and relevant during the year and also, for her design and production of this annual report.



Above: ROMAC regular E-Newsletter featuring an update on Vincent’s progress.



Glenys Parton

New Zealand
Chair

New Zealand Region's Report

The New Zealand region has treated 4 children this year, the lowest number in my time as Chair of the New Zealand region. All treatments this year have required remedial cardiac treatment and, 1 patient returned to New Zealand to have follow up treatment after extensive surgery last year.

The low number of patients is a result of New Zealand's slow start early in the year because of a shortage of cardiac surgeons in Starship, New Zealand's leading children's hospital based in Auckland. Just as staffing was returning to capacity and we began to plan the next cases, the COVID-19 pandemic struck. New Zealand swiftly went into lockdown and this courageous move had the benefit of eliminating community spread of the virus in New Zealand. Because of this, hospitals and isolation facilities had only low numbers of cases to manage at any one time.

Our last patient, Gabriella, was squeezed in and left the country in mid-March (7 days before lockdown) after a relatively short stay of 36 days, despite some post-operative complications. We had a very happy mother email her gratitude for being able to celebrate Mother's Day in Fiji with a healthy and thriving baby daughter.

The New Zealand team has continued to keep in touch regularly in these unprecedented times and supported each other from our individual isolation bubbles.

We have adapted to using Zoom for our own meetings, meetings with our Australian counterparts, attending club meetings, and keeping ROMAC foremost in Rotarians minds.

One of our achievements this year has been D9920 Takapuna Club's successful bid for a Global Grant for the treatment of patients and in-service training for primary health care workers in Vanuatu. Patients eligible for treatment under the grant will be selected as soon as our borders open and treatment at Starship recommences.

The second fundraising success is the project driven by the partner of the District Governor of D9910, Jasmine Kiernan. Despite the year cut short by the COVID-19 lockdown and being restricted to residing on Norfolk Island, Jasmine has not been deterred from her passion for ROMAC and her mission to raise its profile and funds for our charity. Jasmine created some wonderful mosaics and there was a generous response of Rotarians procuring them in support of ROMAC. To have Jasmine and her Rotarian followers share our passion and interest is deeply gratifying and much appreciated.

Jasmine's generous donation of \$10,000 from the mosaic project will go towards the training of primary health carers in the countries from where our children originate. We await the return of Ian and Jasmine to New Zealand when the borders open so Jasmine can make this donation personally.

We continue to be grateful for the unfailing support and collegiality from the dedicated medical teams at our supporting hospitals and in our contributing countries, who go out of their way to assist and change the lives of the children ROMAC steers their way each year.

The dedicated staff at Ronald McDonald House continue to provide a warm, welcoming and nurturing environment for

our patients and their families, making their stay in New Zealand as stress-free as it can be at such a challenging time. They are an integral part of our team and we honour their generosity of heart.

Members of the New Zealand Regional committee continue to work together to achieve the best outcomes for the children we treat and we all feel a sense of pride in being part of such a great Rotary team and project.

Ma te pouiri e hanga te mauritau, ma te maru ka kaha te whakapakari ake.

Adversity builds resilience, resilience builds strength.



Above: Jasmine Kiernan with Ben.

Below: Viliame who is also featured on the Annual Report cover.



Robert Cooper

Western Chair

*Western
Region's Report*

There were no ROMAC patients coming to the Western Region this year so my efforts were focused on fund and awareness raising. Due to the COVID-19 pandemic, club visits by guest speakers were curtailed. Whilst lots of clubs used Zoom or other platforms for meetings, I did not seek to be involved. Anecdotal evidence from my inquiries reveal that clubs prefer a face-to-face presentation when funds are being raised.

Western Australia, due its remoteness and strong Government, seems to have avoided the effect of COVID-19, resulting in a return to normal sooner than other states in Australia. I have sent an invitation to all clubs in Western Australia to have either a representative of ROMAC as a guest speaker or, where distance and cost prevent this, to have a thumb drive presentation for the club. The latest ROMAC presentation provided by Gina Growden is self-explanatory and can be return posted to any club in the state.

I met with Dr Aresh Anwar, CEO of the Perth Children's Hospital, last November but due to COVID-19, I do not expect to meet again with him until early August.

I am pleased to say PDG Brian Eddy has taken up the position of D9465 Chair. D9455 is still without a chair but Brian and I are working on it. I have relinquished the position of Treasurer at my club so I can concentrate on ROMAC.



Jill Oliver

Southern Chair

*Southern
Region's Report*

The Southern Region has been very quiet during the past year with only one child being hosted - our first patient in Regional Victoria.

Ballarat Health Services accepted Guardian, a 4-year-old boy from Nauru, for treatment under local eye surgeon Dr Michael Toohey. This not only gave D9780 a chance to become involved in ROMAC patient care but also it spread the word of ROMAC throughout the broader Victorian Country community. His Sponsor Club was Alfredton and his hosts were Jill & Andrew Oliver.

Guardian was initially referred to ROMAC by the President of the Rotary Club of Nauru as there are no eye surgeons on the island. He was on a waitlist for 2 years to see the visiting ophthalmologist.

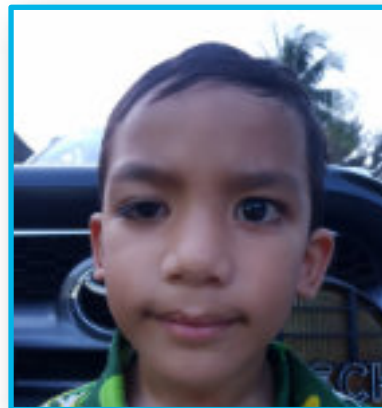
Guardian arrived in July in Ballarat for a simple repair of ptosis to his right eye by Ophthalmologist Dr Toohey. However, his condition was not isolated. He was diagnosed with the ptosis as well as a double elevator palsy and was unable to be treated without worsening his appearance.

Despite his diagnosis, Guardian has perfect vision and has adapted to his condition. He travelled home via Brisbane where he spent a short time with family and friends. A huge thank you to Northern Region Rotarians once again for their assistance with travel logistics through Darwin during the early hours.

Prior to the COVID-19 pandemic, the Region held two small fundraising activities. However, we had to cancel our major fundraising event, which was due to be held in May. Our donations have decreased this year, but not unexpectedly, with clubs donating to drought and bushfire relief programs.

I thank the District Chairs for their patience during such trying times and welcome new D9790 Chair Bruce Walker and D9780 chair Jane Jens.

I also thank outgoing D9780 Chair, and past Southern Region Chair Gaynor Schols. Gaynor has devoted many years to ROMAC, is a wealth of knowledge and has been an invaluable resource to me over the last year. We all wish her well in her retirement.



Above: Four-year-old Guardian.

Below: Guardian with Orthoptist Hayley.





Ian D'Arcy Walsh

Central Chair

Central Region's Report

Circumstances meant that Central Region did not receive any patients this year. However, we have remained actively promoting ROMAC to the Rotary and Rotaract Clubs in our Region, which has undergone a number of changes.

Our very hard working and dedicated Medical Officer of many years, Dr Allan MacKinnon, had to stand down for health reasons and his position has been taken up by Dr Nigel Stewart, a prominent paediatrician from Port Augusta. We welcome Nigel to the Central Region Committee and express our sincere thanks to Allan for his outstanding service to ROMAC.

Our Regional Chair for the last three years, Brett Dalton, also had to stand down during the year for personal reasons. His position was taken up in February by D'Arcy Walsh after he joined the Committee in December. We also extend our thanks to Brett for his service to ROMAC. Both Allan and Brett have remained on the Committee.

The COVID-19 pandemic forced Rotary clubs to meet online, which allowed us to offer to them ROMAC presentations via Zoom. A total of 18 Rotary Clubs and 1 Rotaract Club took up our offer. Two other Clubs received face-to-face presentations at traditional meetings.

These presentations have resulted in 8 Rotary Clubs and 1 Rotaract Club making a donation to ROMAC and 1 Rotarian

becoming a significant "friend". It has also brought about 2 of our clubs initiating specific fundraising projects for ROMAC; McLaren Vale has been making and selling Beanie hats and Unley has conducted a reverse raffle. We thank all these clubs for their support.

We have also made some changes at the Regional Committee level, attracting 7 new members (5 Rotarians and 2 Rotaractors) onto the Committee. Each Committee member has agreed to be the ROMAC liaison person for about 8 different Rotary or Rotaract clubs. As the liaison person, the Committee member will remain in regular contact with their clubs, keeping them updated about ROMAC and seeking their continued support.

Committee members are looking at improving the follow-up with patients who have been treated in our Region, in addition to their normal hosting roles and linking with the medical organisations and institutions.

We hope some of these initiatives will keep ROMAC in front of the clubs and improve our fundraising so we will be ready to receive new patients when travel restrictions are lifted.



Above: Members of the Rotary Club of McLaren Vale at their Beanie Fundraiser for ROMAC.



Wayne Litherland

Northern Chair

Northern Region's Report

Once again, in a year of frustration and disruption, Northern Region was not able to directly support any patients for medical procedures.

We were, however, on hand to provide support through transfer assistance through Brisbane Domestic and International airports. Vincent was transiting from the Solomon Islands to Canberra accompanied by Doctor Janelle Solomon, due to the severity of his condition. Her return flight was delayed and urgent changes were coordinated by Rotarian David Ambrose including overnight accommodation, flight changes and coordination with Solomon Islands. Later that month, Operations Director Judy Holland, assisted by David, home-hosted returning patients Georgina and Asiri on their journey from Adelaide to Solomon Islands after their treatment. Additional transfers included patients from Nauru.

Natural disasters such as drought, floods and bush fires impacted fund raising early in the year and in the latter half, the COVID-19 pandemic limited our ability to meet face-to-face or receive patients. Spots at District conferences and club visits were cancelled. Specific fundraising promotions were cancelled or delayed. We had been campaigning for further support from Queensland Children's Hospital and other private hospitals and had to cancel scheduled medical panel meetings at these venues.

There were, however, some high points. The Rotary Club of Caloundra Pacific coordinated its annual Trivia Challenge successfully. There was considerable support from some generous benefactors who prefer to remain anonymous.

It is disappointing that financial support only comes from approximately 12% of clubs in the region but innovation in presenting to clubs via video conferencing during shutdown should not be lost and must be continued in the future. The story of ROMAC must get out, particularly as Districts in our region amalgamate, resulting in a wider footprint for District Chairs.

Thanks to all District Chairs and committee members. On to 2020/21 with more support and patients returning.



Above: Vincent accompanied by Doctor Janelle Solomon and his mother.

Below: Returning patients Georgina and Asiri with their carers and Judy Holland, Operations Director.





Bob Richards

Former Eastern Chair

Eastern Region's Report

It has been a frustrating year for Eastern Region. In the first half, progress with three burns cases was delayed due to facilities at Westmead Children's and Royal North Shore Hospitals having no spare capacity. Just as this was easing, the COVID-19 pandemic occurred and put all on hold. Two heart cases were similarly affected. We can but hope that once the COVID-19 restrictions have passed, and the hospitals return to normal function, these cases will be able to be resurrected.

On the positive side, we have had two cases in Eastern Region; Vincent with a tracheo-oesophageal fistula, and Germaine with a heart condition.

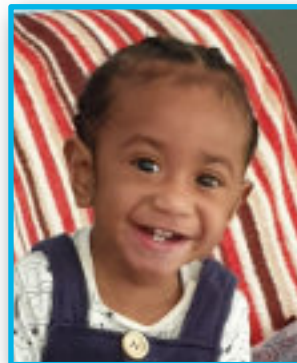
After arriving in Canberra in July 2019, Vincent had 2 major operations, plus 20 day procedures. He celebrated Christmas and his first birthday in the homes of his Rotarian carers. By early June 2020, Vincent was crawling all over the house and walking holding one hand.

Vincent's medical condition has been the most complex that ROMAC has had in Canberra. Our appreciation must go to the Canberra Hospital for accepting the complex care of Vincent and to Dr Celine Hamid and Prof Croaker for their surgical expertise and to the Rotary District Committee for assisting with some of the expenses over the last 12 months. Robyn and Robert Pearson took over care in March while Sandra and Brian Goldstraw

were on holidays and they continue to be a wonderful support for this family.

Germaine's story is unusual. Germaine was already in Australia with her mother, who was studying nursing at Wollongong Hospital, when she was referred to ROMAC. She encountered some cardiac problems and Dr Ian Nicholson, a paediatric cardiac surgeon at Westmead Children's Hospital, asked if ROMAC could help. Normally, ROMAC does not accept children who are already in Australia but Germaine could not receive the necessary surgery in the Solomon Islands. The ROMAC Board agreed to accept the case and Germaine had her operation in March. This operation was the last elective surgery performed at Westmead Children's Hospital due to COVID-19 so she was very lucky.

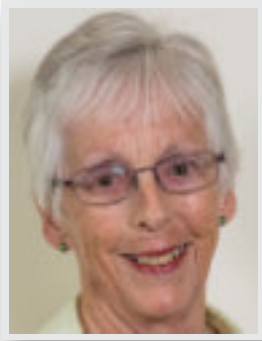
She recovered extremely well and can play, run and engage in sporting activities without running out of breath after a few seconds. Her mother passed her nursing exams and they were able to go home on a rare repatriation flight in July.



Left: One year old Vincent.

Below: Germaine and her mother.





Helen Ryan

Current Eastern
Chair

*Eastern
Region's Report*

Special Thanks

ROMAC extends a special thank you to our sponsors, who help support our patients.



It is a pleasure to be part of this excellent program. Although I am new to my role, I have found it very interesting.

We have a new Chair in D9670, Jim Klumpp who has taken on the role with enthusiasm. I am delighted to say that all District Chairs in the Eastern Region have been working diligently in very difficult and restricted circumstances to continue the promotion of ROMAC and its good work.

Currently we have two children in care, Vincent and Germaine, who are doing well. We have been unable to accept others to date but I understand that there are some pending so look forward to their arrival.

Although fundraising is disappointing with all the problems of bushfires, drought and flooding, Eastern Region donated more than \$40,000 to ROMAC which is very pleasing and much appreciated.

My thanks to all the District Chairs; D9710 Sandra Goldstraw, D9685 Ann O'Shannassy, D9700 Ken Engsmyr, D9675 Pip Lovely OAM and D9670 Jim Klumpp, for their commitment to ROMAC and their ongoing dedication to patients.



Who's Who at ROMAC 2019-20

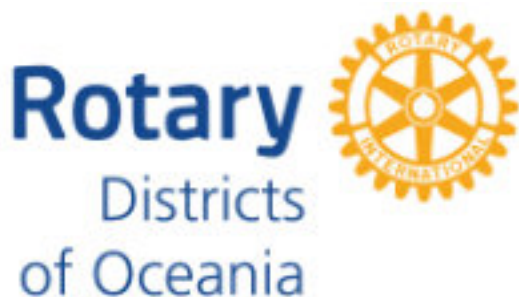
Role	Name	ROMAC Email	Club Affiliation
Chairman	Harold Sharp OAM	chair@romac.org.au	Crows Nest
Deputy Chair	Brian Eddy	deputychair@romac.org.au	Rossmoyne
Treasurer	Michael Carrigan	treasurer@romac.org.au	Buderim
Medical Director	Larry Roddick	medical@romac.org.au	Charlestown
Operations Director	Carol Bourne (Jul-Mar) Judy Holland (Mar-Jun)	operations@romac.org.au	Belvoir-Wodonga, Redlands Bayside
Secretary	Jim Prokhovnik	secretary@romac.org.au	Albert Park
Operations Manager	Judy Holland (Jul-Mar)	opsmanager@romac.org.au	Redlands Bayside
Operations Manager (New Zealand)	Sue Smith	opsnz@romac.org.au	St Johns
IT Support	Richard Woodburn	itsupport@romac.org.au	Randwick
Alumni & Patient Evaluation	Bob Richards (Mar-Jun)	evaluation@romac.org.au	Sutherland
Communications Coordinator	Gina Growden	communications@romac.org.au	Terrigal
Communications Coordinator	Maggie Alexander	editor@romac.org.au	North Ryde
District Governor Rep (Zone 8)	Ros Kelly	roskellyd9630@gmail.com	Woolloongabba
DGE Rep (Zone 8)	Adele Hughes	adelerotary@gmail.com	Discover Coast
DGN Rep (Zone 8)	David Mayne	david.mayne@wesmold.id.au	Port Macquarie
Regional Chairs			
Northern D9550, D9570, D9600, D9630, D9640, D9650	Wayne Litherland	northern@romac.org.au	Rockhampton South
Eastern D9670, D9675, D9685, D9700, D9710	Bob Richards (Jul- Mar) Helen Ryan (Mar- Jun)	eastern@romac.org.au	Sutherland, Nelson Bay
Southern D9780, D9790, D9800, D9810, D9820, D9830	Jill Oliver	southern@romac.org.au	Alfredton
New Zealand D9910, D9920, D9930, D9940, D9970, D9980	Glenys Parton	newzealand@romac.org.au	Tauranga Sunrise
Central D9500, D9520	Brett Dalton (Jul- Mar) Ian D'Arcy Walsh (Mar-June)	central@romac.org.au	Burnside, Adelaide
Western D9455, D9465	Bob Cooper	western@romac.org.au	Kwinana

ROMAC

*Quite simply...
because little children from
neighbouring countries need our help.*



ROMAC is a truly transformative humanitarian project of Australian and New Zealand Rotary Clubs with assistance from Rotarians in the Oceania region.



AUSTRALIA
www.romac.org.au

NEW ZEALAND
www.romac.org.nz