

**Rotary**

Districts  
of Oceania



**ROMAC**

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Medical Aid  
for Children

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## **Mission:**

To provide specialist treatment for children, from developing countries, in the form of life saving and/or dignity restoring surgery not accessible to them in their home country.

## **Objectives:**

- > Provide hope and restore dignity to transform a child's life.
- > Provide the best possible surgical and medical expertise.
- > Engage Rotary and the community at all levels to fund and support the ROMAC cause.
- > To maintain and improve the quality of the management process and ensure high quality governance of the ROMAC program.



**NEW ZEALAND PATRON**  
Past Rotary International  
President Bill Boyd QSO.



**AUSTRALIAN PATRON**  
Former cricketer and  
media personality  
Max Walker AM.

# Once upon a time...

... in 1988 an Australian surgeon, whilst in Fiji, noticed a young child who needed serious medical treatment that was not available over there. So he contacted an Australian Rotarian and between them they organised for the child to be sent to Australia where he received medical treatment that changed his life.

**Little did they know that their humanitarian actions would result in over 384 children's lives changed and saved by a dedicated group of volunteer Rotarians, Rotary clubs, doctors and their allied teams in Australia and New Zealand under the Rotary Oceania Medical Aid for Children (ROMAC) banner.**

Amongst the first patients ROMAC treated were 11 years old Vikash, treated for a herniated brain and 12 years old Ramesh, who suffered brittle bone disease. Both boys were from Fiji.

Sadly, so many of ROMAC's 'children' have suffered their illnesses and conditions - from disfigured faces, extensive untreated burns, conjoined twins, cardiac and orthopaedic problems - for many years before ROMAC becomes aware of them and is able to organise their treatment. These delays, and the complexities they sometimes create, are challenges to our surgeons that they would not normally face. In a number of cases they have had to be very creative in finding new ways to treat them. Fortunately these initiatives have also benefited our children. **For example, extensive**

**burns cases in our countries are normally treated within hours, but when they have not been treated for six months our surgeons created new, unique ways for them to be treated that, subsequently, hundreds of Australians have benefitted from.**

It's not easy generating publicity for Rotary, yet the general public have read, listened to and watched probably more ROMAC success stories than any other Rotary project. **From alarmingly disfigured faces to emergency life-saving operations, it's no surprise that these sometimes desperate, humanitarian stories have frequently made**

**'good news' in newspapers, magazines, on the radio and on TV, the latter often during the evening news.**

Two young patients have had tailored prosthetic legs. K'Chin and Nong Van Hung are both from Vietnam. Hung was burnt as a baby, his lower right leg contracting to his thigh. Inoperable, his lower right leg had to be amputated. K'Chin lived in a remote village and suffered fractures to his right leg which became deformed as a toddler. ROMAC brought him to Brisbane where he under-

went many orthopaedic operations but, unfortunately, amputation of the lower leg became necessary and he too was fitted with a prosthetic leg. He later attended college in Australia where he was awarded his school's Student of the Year.

K'Chin was interviewed on a BBC programme regarding his ROMAC journey. **The BBC estimated that this interview was heard by up to 40 million people.**

A wonderful achievement for K'Chin and outstanding publicity for ROMAC and Rotary.

**Over the years ROMAC has built a solid relationship with Immigration.**

They not only arrange the patients' and parents' travel documents at short notice but also have assisted with publicity.

ROMAC also recognises and appreciates the outstanding commitment of our key overseas contacts

who refer patients for surgery and do so much follow-up with their families.

We also receive incredible support from a number of drug companies, plus prosthetics are also provided to young patients by supportive Prosthetists.

ROMAC could not have achieved such results without the support of Rotary Clubs who volunteer their services, organise accommodation when the surgery is completed and support ROMAC with regular donations.

On behalf of ROMAC, we thank you all for without you our children and their grateful families would not ... **... live happily ever after.**

**Jill Ellis**  
Editor



*Left K'Chin's leg before his operation, right Hung enjoying a day at school after his operation.*

*Above both Hung and K'Chin, now much older in this recent photo, with Rotarian Andy*

*Csabi, himself an amputee as a result of the Bali bombing, who gave moral support to Hung. They're all showing off their prosthetics!*

# Chairman's Welcome

Rotary Oceania Medical Aid for Children has set about meeting the challenges of 2013/2014, with hard work and humility. **Now in its 26th year ROMAC is proud to have treated over 384 children**, from developing countries, with major health problems requiring lifesaving and dignity restoring surgery.

Once again, thanks to the continued support and generosity of Rotarians, surgeons, hospital staff and management, the Department of Immigration and other Government departments, corporations and numerous individual sponsors, we have continued to enable children to lead happy lives with an opportunity to realise their full potential.

In June 2014 the Rotary World Conference was held in Sydney. Rotary Oceania Medical Aid for Children was delighted to join others in the Rotary Family by presenting our achievements at the ROMAC booth. Many people came to the booth and asked questions about our work.

**In my humble opinion all left with admiration and a new insight into the complexity and importance of the work we do.** Rotary Oceania Medical Aid for Children Board would like to thank marketing consultant Phil Rosenberg, Past ROMAC Chairman Geoff Dainty and ROMAC Board adviser Bryan Mason for the very impressive display booth.

## SIGNIFICANCE OF ROTARY

**Through its work, Rotary Oceania Medical Aid for Children continues to embrace the Rotary Foundations motto of *Doing Good in the World*.**

**In partnership with the Rotary Foundation, we have used global grants to provide opportunities in New Zealand for young international doctors and nurses to develop new skills which are transferable to care in their homeland.**

Each left with a progressive attitude and a range of new experiences empowering them to be more proficient in their care giving.

ROMAC has had many challenges to deal with in the past 12 months. **Major issues that have arisen include rising costs of surgeries and treatments not to mention an economic downturn, which has impacted on fund raising. In some cases, costs have risen by as much as 100%. Substantial rises include the daily bed rate for a paediatric ICU bed and consumables such as medications and bandages.** Despite increased costs it is with thanks for generous donations in kind from Johnson & Johnson Medical that significant savings in costs have been made this financial year and through their help Rotary Oceania Medical Aid for Children has continued to transcend all impediments to treat 46 children in 2013/2014.

## NEW BOARD POSITIONS

As previously stated Rotary Oceania Medical Aid for Children has a natural attrition process and in 2013/2014 we have seen new Rotary talent join our Board.

On behalf of the Board I welcome the following to our Board and Operations Committee:

- Gaynor Schols, Southern Region Chairman.
- Alun Hughes, Central Region Chairman.

- Margaret Hayes, Northern Region Chairman.

## OUTGOING BOARD MEMBERS

A number of members of the committee had to resign for personal reasons including Elaine Morgan, Mel Gray and Oleh Bilyk. I would like to take this opportunity to thank the outgoing members for their excellent stewardship of ROMAC; because of you, many children across the Asia Pacific region are leading a better quality life.

I would also like to thank those who remain on the Board. Your past and future contributions are not only appreciated by myself but also by the children and families you have served and those you are about to serve.

## SUPPORTERS

Rotary Oceania Medical Aid for Children has many supporters who donate, time, money, and resources. This year, three District Governor's wives chose ROMAC as their special project. Whilst accompanying their husbands they managed to raise enough money to treat at least two children. **In one instance the money raised was impressively six times the amount of the year before and more than twice the best ever amount of money raised from that district.** I know that these people thought that they would try and raise some money but in ROMAC money means lives. **Please encourage your partners to take on ROMAC as their project because every penny raised will go towards changing children's lives and the lives of their families.**

The ROMAC Committee is also very fortunate to have the support of our partners, each has given us massive support when times get tough and for that I thank you all. One partner requires a special mention and that is Mrs Lyn Mason who, over the past 12 months and past 20 years, has provided morning tea, lunches and recently evening meals. On behalf of the Board thank you.

To all of our amazing supporters thank you because without **YOU** we could not have accomplished our mission.

## IN CONCLUSION

In 1905 Paul Harris could not have dreamed that Rotary would have had 1.2 million members. He could not have dreamed that billions of dollars raised by Rotarians would improve the lives of millions of people.

**In Rotary Oceania Medical Aid for Children we dream of saving the lives of children with illnesses that are too difficult to treat in their own countries.**

Dreaming, as Paul Harris said, *"Is not so bad if one dreams good dreams and makes them come true."*

Through ROMAC, Rotarians have made the dreams of 384 children and their families come true. On behalf of the children and their grateful families., thank you.

Yours in Rotary Service,

**Brendan Porter**  
Chairman, 2013-2016

*"Perhaps dreaming is not so bad if one dreams good dreams and makes them come true"*  
**Paul Harris:  
My Road to  
Rotary**

# Southern Region

Victoria, Tasmania plus parts of Southern NSW

Due to a scarcity of available hospital beds we were, unfortunately, only able to bring patient Philip Samson to Melbourne. Fortunately, the availability of beds is much improved and we look forward to bringing more to our region.

**Philip Samson was a 16 year old boy from Samma village, North Efate, Vanuatu. He broke his leg while playing soccer when he was 12 and since the family had no access to a doctor, the bone was left to heal without treatment.**

The pain meant that he had to discontinue his schooling and spent many months lying at home in the family hut. His bone mended at an unusual angle leaving him with a limp and worsening hip problems.

ROMAC arranged to bring him for specialised orthopaedic surgery at Epworth hospital in Melbourne. The operation took place in December when his femur bone was cut, repositioned and reset in a normal position.

Philip and his Mum, Emma, arrived a week before the operation to have some time to adjust to life in the fast lane.

**TV, hot running water and all our mod-cons were totally new to them, as they live in a simple wooden hut with no electricity.**

During that week they were taken to visit the Melbourne Aquarium with Liz Olie, attended a BBQ at John Sander's home in Wandin with the RC of Wheelers Hill, and also visited Healesville with Gary

Davies (RC Dingley Village) and Graeme Chester (RC Healesville). A big thank you from ROMAC to those clubs and Rotarians who helped Philip and Emma. Liz Ollie, from the Rotary Club of Doncaster, opened her home to them prior to surgery and during the recuperation phase they stayed with Diane and Gavan McIntyre from the Rotary Club of Wandin. Max Mc William from Wandin arranged a fundraising dinner, with Max Walker as the guest speaker, and they raised \$13,000 for ROMAC so they deserve a big round of applause!

Barbie Everitt can speak Bislama and was with Philip and Emma translating and supporting for all his doctor's appointments and every day that he was in hospital.

The Rotary Club of Doncaster presented Barbi with a Paul Harris Fellow to say thanks.

**As the financial year ended we welcomed Linh Da Vo and her Mother Hahn.** Linh Da and Hahn are being hosted by Kim Thien Truong of Kim's Foundation of Hope. Linh Da's surgery will take place after this publication is printed.

Thanks to Mel Gray who resigned as Southern Region Chair in May 2014, and thanks also to John Bengner who helped Mel and continues to mentor me my new role.

Recently I attended a function for the visiting First Lady of Timor Leste, Dr Isabel da Costa Ferreira. She warmly thanked ROMAC for helping so many children from Timor Leste. I was also invited to represent ROMAC at the "sod-turning ceremony" for the new Monash Children's Hospital.

This new hospital is expected to open in 2016

**Gaynor Schols**



Top, Philip, below with members of the Rotary Club Wandin. Below Graeme Everitt, Gaynor Schols, Philip, Emma and Barbi Everitt. Bottom Linh Da's new friend Tung from Vietnam playing with man's best friend 'Flea' and Linh Da, on the right, before her operation.

# Western Region

## Western Australia

With an ongoing issue with available beds for ROMAC patients we were only able to have one child accepted into Perth's Princess Margaret Hospital for treatment during the 2013-2014 period.

**Bakita Dos Santos was a 28 month old little girl suffering from two holes in her heart.**

She arrived February 2014 weighing only 7 kg accompanied by her mother Rita.

After pre operation checks on her condition, Bakita was operated on early morning 5 days after her arrival. After a 90 minute operation and a few hours recovery, Bakita had a new lease on life and made sure everyone was aware of it.

**From arriving very weak, underweight and lethargic, her focus was to eat and run around the house much to the delight of mother Rita who until ROMAC intervened had prepared herself for the worst as she watched Bakita struggle with her heart problem.**

They left Perth 4 days after the operation with Bakita now 4 kilograms

heavier and very active.

Reports from Timor show she is now enjoying life as any normal child in the village.

My recent trip to Timor gave me the opportunity to follow-up on our 2012 heart patient Abilio Carlos who was also treated in Perth for a heart condition.

**He also arrived very weak and underweight and has since recovered very well. He is now a very healthy 7 year old playing soccer with his brother on the local neighbourhood team.**

With the opening of a new Children's Hospital in Perth later in 2015 we hope to have a regular acceptance of ROMAC children. This will also give our supporting Rotary clubs the chance to become more involved in hosting the children and seeing their amazing transformation after their operations.

A big thank you to all the Western Region Rotary clubs who have continued to support ROMAC and to the many new supporting clubs who have been made aware of ROMAC by the wives of both our District Governors who have accepted ROMAC as their project to support.

**Peter Snell**



*Top left Abilio snuggles up to his new 'friend' and below he enjoys a slide with his aunt. The bottom photo was taken two years later with his family in Timor where he now enjoys a normal and sporty life. Top right Bakita tries reading ROMAC's newsletter written in a 'strange' language! Below she too enjoys the playground equipment.*

# Northern Region

Northern New South Wales, Queensland,  
Northern Territories + Timor-Leste, Papua New  
Guinea and Solomon Islands

**Indonesian sisters Rafika and Uswatun Rasmiddin suffered horrendous burns in 2005,** caused when their modest home caught fire, resulting in scar tissue forging both girls hands and toes.

They were originally taken to Aceh for treatment, albeit very primitive. By 2007, when they were no longer able to use their hands and feet, with joints dislocated and contorted, the Red Cross drew them to ROMAC's attention and treatment began.

**For the next two years both girls endured 125 surgical procedures - most extremely painful - at the Burns Unit, Royal Children's Hospital.**

Dressing changes inflicted hours of intense pain on the girls. But it was worth it as they were able to walk and use their hands when they went home in 2009.

All went well for a few years, but as they grew they again had difficulties with contractures so they returned in 2013 when work immediately commenced on Uswatun's hands and feet, and on Rafika's face due to contractures of her lips, side of her face and chin.

Special garments were made for Rafika's head to be worn day and night, plus a mouth stretcher had to be worn every night.

Both girls are extremely intelligent and follow exactly what the Doctors advise. Their tolerance to painful dressing changes is evidence of their stamina. This time skin grafting was minimal, the majority of the work was restructuring and stretching.

Both occupational and water therapy played a large part in their recovery, eventually enabling the girls to use their fingers to pick up small and slippery objects.

**The treatments they endured were a true test of the girls stamina.** The confidence they placed in the ROMAC team and the surgical team at Royal

Children's Hospital Burns Unit, headed by Professor Roy Kimble, was helpful and rewarding.

The ROMAC team in turn were always there for them, supported and comforted them, which they said made them feel safe and loved. The stamina of the ROMAC team occasionally crumbles, needing to wipe away tears when overcome by their suffering.

Some days are long for the ROMAC team, with early morning starts and late night finishes after surgery.

**Ground breaking treatments were trialled on the girls with great success.** Pigs' achilles tendons were used for grafting and K-Wires were inserted under the skin of their fingers to hold joints in place.

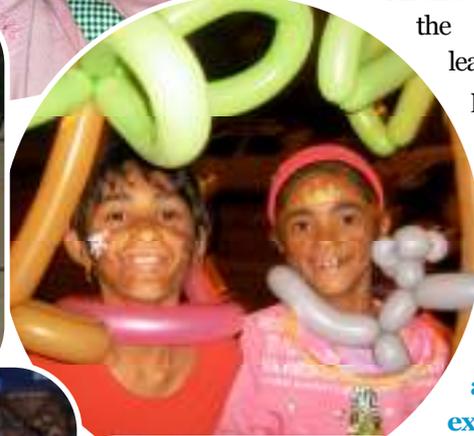
Because of the state of deterioration of the health of our ROMAC children upon arrival, the Surgeons and staff of the Burns Unit, Royal Children's Hospital gain valuable experience from working with these complex cases - the benefits of this learning in turn is put to good use on our Aussie children.

**It was suggested that over 100 patients in Queensland and possibly in excess of 1,000 Australia wide have benefited.**

Two severe burns patients arriving for treatment at the same time is an enormous workload on the ROMAC team. We were so appreciative of the valuable

support given by the Rotary Club of Toowong.

Because the girls were accommodated very close to me, they were able to spend time with me. We visited a Cerebral Palsy League function where they met some of their clients. Two young men were very interested in the girls injuries. The girls also asked questions and demonstrated the use of their communication board - a wonderful experience for them which helped them cope with their disfigurements. We had happy times walking, or just sitting for hours by the river where deep and meaningful discussions took place. We also baked biscuits



Top + lower left the burns, right at a fund raiser, bottom left with ROMAC bike ride organiser Tony Worrada and ROMAC's Jill Ellis, right back home .

which were delicious treats for the girls. Their ROMAC Coordinator, Judy, also gave so much of her time to interesting activities to keep the girls focused.

**We were very proud of the girls, now 14 and 15, who have become mature, responsible and delightful young ladies.**

ROMAC has made such a difference to their lives.

**Baby Gelina, a very sick, severe heart case, and her mum Marcelina, from Dili,** were met by the ROMAC team at the airport, including Gelina's host mother, Roni and friend Bernadette from the Terrace Timorese Network (TTN). They frequently assist the Christian Brothers with building, supply of fresh water, teaching coffee farmers how to obtain better yields etc. As Roni frequently visited Dili gaining extensive exposure to the culture, I had no doubt this hosting would be a pleasure.

**When we greeted Gelina, and her Mum, any prior reports we had received on her condition, were not misleading - her eyes well sunken and dull, she was very undersized, her bad colour and lifeless demeanour told it all.**

House mother Roni immediately fell in love with her new baby, but time was not to be wasted and Gelina was taken to the Mater Hospital where the Cardiac team at Mater Hospital determined that Gelina needed nourishing before her major open heart surgery. Gelina became exhausted just sucking her bottle. Roni and I worked in close contact to be sure all progressed well. We purchased a new teat with a larger holes that enabled her to finish her feed. There was much jubilation when the bottle emptied! Gelina looked better and put on a little weight - we were delighted.

**During one of her visits to Mater, before surgery, Marcelina asked if her baby could be baptised. Gladly Dr. Rob and the ROMAC team called a priest, Gelina was baptised and mum**

**was happy.** Gelina was soon back in hospital for her surgery with Mater's wonderful Cardiac team.

**When 6 months old Jofi and his mother Efi, arrived from Dili, their hosts, the Benham family, were waiting.** On their way home they realised that Jofi's medication had been left in Dili. It was early evening and they couldn't find an open chemist.

**Fortunately, the doctors at Mater Hospital were able to access their closed Pharmacy to provide the medication.**

The Doctors ran some tests and made arrangements for Jofi to return to hospital the next day to check out a further potential problem he had diagnosed, which was a leaking valve. Jofi then developed a few problems that delayed surgery, but it soon commenced even though Jofi remained with an open chest in ICU for an extra day. This was difficult for Efi to accept, but as usual, the ROMAC team were there to comfort her.

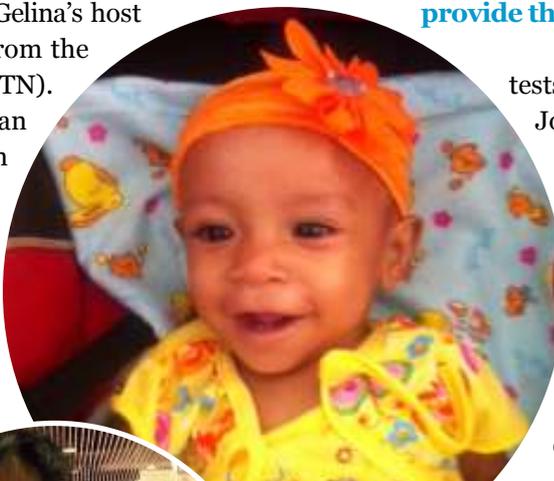
**Jofi progressed quickly under the care of Dr. Rob and Mater's the Cardiac team, gaining weight, smiling and eventually kicking.**

Efi was overjoyed at his progress and could not bear to be away from him. As usual, our rewards came with seeing an appreciative mother, happy beyond belief, nursing and admiring her baby continuously. Jofi was bright eyed, putting on weight and lively.

What more could we ask... ..another life saved.

**Heart patient, baby Specialina and mum Einoma arrived from Nauru, together with Oncology patient Jimaro and his mum Vada.**

The ROMAC team knew we were expecting a very sick baby, but it soon became evident that this was not our only problem. Einoma, who had felt secure with Vada, was not happy when she found they were residing far from each other and that their children were in



*Top centre Gelina; left, arrives age 7 months, weighs 4.6kg with mum Marcelina; bottom back home with dad Felomeno and brothers; top right mum and Gelina with ROMAC's Denise, bottom right host parent Roni.*

different hospitals!

**Specialina was taken immediately to Mater Hospital and admitted into the care of the Cardiac Team. Surgical intervention was urgent, so no time was wasted.**

All went well during surgery and 3 days in ICU, but she then contracted an influenza virus (which is not uncommon with heart babies). The coughing was so hard, this little baby would strain from head to toe in her effort to expel the thick mucus. It was so distressing to watch, but we were comforted by knowing pain killers were administered to combat discomfort from the recent open heart surgery.

Within 7 days Specialina was readmitted to ICU for a short stay, medication was administered to dissolve the mucus, which would pass through her system in urine. This worked so well and Specialina began to thrive.

**Einoma had never heard Specialina communicate, never seen her smile and could not believe the transformation happening before her eyes!** Einoma was frightened by the complexity of a huge hospital and ICU, as well as having to deal with her sick baby.

Naturally the ROMAC team supported Einoma and her baby Specialina, so we brought her 'home' cooked food that she liked, took home her washing and, of course, visited her daily.

**The good news was Specialina was responding! When I sang rhymes to her she would respond with her own little sounds. Soon after I found she would sing herself to sleep! Life was looking good.**

We had wonderful support and assistance from the Nauru Consul and his wife, who ensured that

Einoma understood what was expected of her and organising accommodation with the well respected members of the Nauru community, Andrew and family. This worked so well. Soon, Specialina was ready to return home, bright, healthy and already beginning to gain weight.

**The ROMAC team are never sure what challenges each day will bring. We must have the flexibility to change plans in a snap such as an unexpected 7am visit to the hospital after a very late night.**

While the child is our prime concern, sometimes problems lie with the accompanying parent which have to be sorted out quickly. Fortunately, this is not common.

**All the hiccups are forgotten when we see a baby bouncing with life, well enough to return home, evidence that our mission has been accomplished.** We bond with the children when here and treat them as our own.

It is a mixed emotional time for the ROMAC team when they return home, knowing we have made life long friends with those who will return later for ongoing treatment.

A special 'thank you' to the Rotary Club of Jindalee for their

sponsorship.

**Elaine Morgen**



*Top Jofi and on the right with mum Efi. Left with ROMAC's Margaret Benham. Bottom left Specialina and right with mum Einoma.*

# Eastern Region

Central, Eastern and Southern New South Wales and the ACT

**Francisca Saldanha, a 15 year old girl from Timor Leste**, stood up in front of 80 members at the Rotary Club of Sydney, and said “thankyou”. Then, with her Dad beside her, she broke down and was lost for words!

Just weeks earlier, Francisca was treated successfully, at the Prince of Wales Hospital for severe scoliosis.

**This was very much another WIN – WIN situation for all, and ROMAC was at the forefront:**

- **Francisca** proudly went back to Timor Leste with a straight back

- **Her dad**, Sebastiao, was delighted knowing that his daughter was no longer the target of hurtful comment.

- **The Rotary Club of Sydney**

could see first hand how their spectacular donation to ROMAC of \$30,000 was used to enable Francisca to lead a normal life. So much so, they agreed to do more of the same for the following year

- **Orthopaedic surgeon** Dr Angus Gray, a strong supporter of ROMAC for many years, proudly added to his list of successes with our children.

- **De Puy Synthes and Zimmer**, who donated special medical equipment, used in straightening Francisca’s back, proudly continued their community support

- **And ROMAC won with another patient, one of close to 400, being treated successfully.**

During the 2013-14 year, there were another 13 patients: nine at the Sydney Children’s Hospital, three at The Canberra Hospital and two at The John Hunter Hospital.

**Baby Bras was a six day old baby boy** who was referred to ROMAC from a village at the eastern end of East Timor with a very serious problem. **He was suffering from excessive secretions from nose and mouth plus vomiting/coughing/mucous**

**shift/mixed with milk after his feeds.**

He was born in a remote village, weighed only 1.9 kg. and mother Ervina’s eighth child. A scan on arrival showed that Bras was suffering from oesophageal atresia and a distal fistula.

**He was in a serious condition and was placed on a glucose drip to keep him alive.**

A medical conference call was made involving Sydney, Canberra, Darwin and Dili to work out how to get around an airline’s refusal to have he and his mother as passengers and the urgency to save this child’s life. If Bras could hang on for 24 hours he would be in Darwin Hospital and be prepared for the long flight to Sydney.

Canberra’s Neonatal Emergency Transport System, a local service that works in close partnership with the NSW equivalent, stepped up to handle Bras and his mother’s journey from Darwin to the ACT.

**Ervina arrived with Bras in Sydney and then travelled to Canberra in a specially equipped NETS vehicle with amazing efficiency and a doctor as escort.**

After surgery to join his oesophagus to his stomach, Bras made a full recovery. He returned home with his mother at a good weight following 9 weeks in Canberra.

**Seven year old Rido arrived from Bali in the care of his grandparents.**

His parents both worked and his grandparents were always there to look after him. Rido's cardiac condition should have been treated much earlier and then his aunt, who lives in Sydney, agreed to meet the costs of his travel and treatment. She was at the airport to meet them on arrival.

**His Hole in the Heart condition was a real handicap, and Rido was tiring quickly and very slow to function.**

Dr Philip Roberts proposed a first non-invasive keyhole surgery operation that would block the hole with an insertion. Unfortunately the inserted device moved overnight and major surgery was required and carried out by Dr David Winlow. After a very short period in ICU, Rido was moved to the Ward. His stay in Westmead Children's Hospital was short and he was permitted to go to his Aunt's home. He returned for a final check-up



*Baby Bras, top, after his operation and left with mum Ervina. On the right a shy and sincere Francisca with ROMAC’s Rob Wilkinson and members of the RC of Sydney presenting their generous donation.*

the following week and all was fine. The latest news from Bali is great. **Rido has gained weight, is now going to school and he has told us that he can do everything now that he couldn't do in the past.**

**14 year old Reedly suffered from Hirschprung Disease.** For 12 years his mother Juliette had to take him to and from hospital in Vanuatu. Reedly arrived in Canberra with his mother, who was apprehensive but happy to finally have help for her son.

**Reedly was very wasted and pot-bellied, with thin arms and legs. His weight was 27.5 kg. and height 133.9 cm.** His abdomen was grossly distended with a 'loopy' appearance. He also had two extra front teeth which caused him to be very self-conscious and prevented him from smiling.

The Hospital's facio-maxilla doctor removed these teeth prior to Reedly's bowel surgery and this really boosted his confidence. After his major surgery, with a new flat abdomen and a temporary colostomy bag (needed for 12 months due to his floppy bowel), Reedly only weighed 21.4 kgs. He needed building up as his arms and legs were so wasted.

He started to eat healthy food. Stoma education was provided and reinforced with a donation of stoma products to last them back in Vanuatu until they returned six months later. When they returned home for the last time Reedly weighed 27.3 kgs. on the airport luggage scales. Juliette was so thankful.

**Special thanks to my District Chairs** Lyn Thorpe D9670; Jan Lindop D9675; Philip Smith D9685; Henry Gardiner D9700; Sandra Mahlberg D 9710 and their committees, for so capably taking care of those patients, and their carers, whilst in Australia.

Thanks also to Garas Khillia, our Sydney airport transfer coordinator, and Leonilde DeAraujo, hostess to a number of patients from East Timor. I'm pleased that most of those District Chairs are continuing, and thank Jan Lindop, who is standing down. Her successor, in D9675, is Maria Moran, from the Rotary Club of Cronulla.

**Club Donations for the year exceeded \$177,000, an increase of 7.2% over the previous year.** Of particular note, Districts 9675 and 9700 had great results, thanks largely to the efforts of two District

Governor spouses in promoting ROMAC as their DG Spouse project: Christine Salter D9675 in 2012-13 and Bettye Tancred D9700 in 2013-14.

Thanks to all those Clubs who donated to ROMAC, we greatly value your support. Given that only 21% of the 285 Clubs in the Region did donate, our challenge is to encourage the remaining 79% to consider ROMAC, with a modest donation, in years to come.

**A special mention to Clubs and Districts who donated in excess of \$2,500:** Crows Nest,

Gerringong Sunrise, Norwest Sunrise, Parkes, Picton, Randwick, Sydney, The Hills Kellyville ("Eat a meal save a child"), Wagga Wagga Koorringal, Woden and District 9700 for their raffle.

In addition to the much-used Sydney Children's Hospitals at Randwick and Westmead, discussions are underway with both the Macquarie and Sydney Adventist Hospitals to treat patients not requiring paediatric intensive care.

**Once again in 2013-14, corporate sponsors Johnson & Johnson Medical and Eureka Funds Management were very generous in their support of ROMAC.**

It was with great pleasure that we welcomed Professor Di

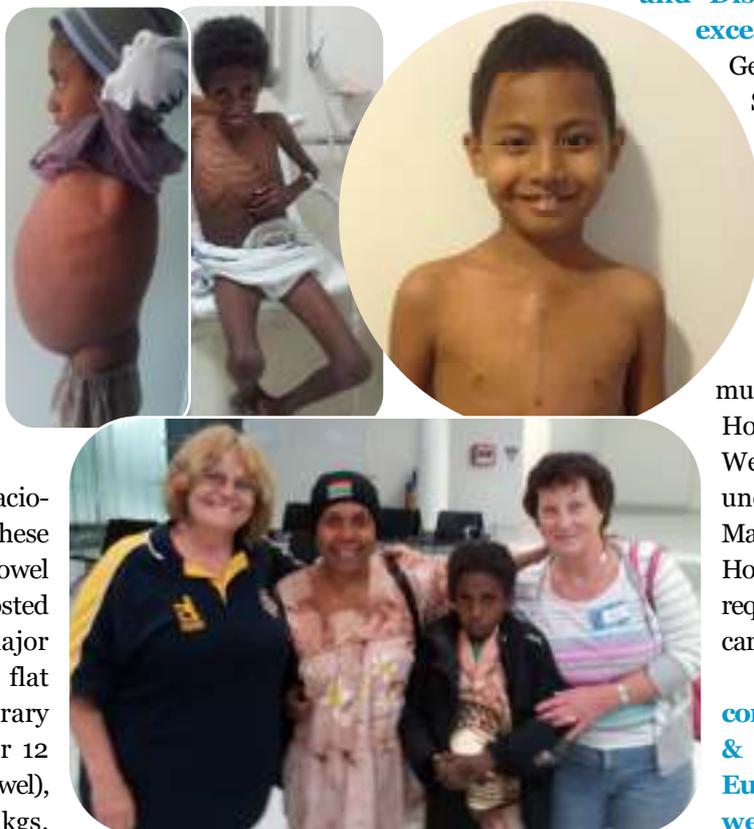
Yerbury (former Vice Chancellor of Macquarie University) and Gavin Fox-Smith (Managing Director of Johnson and Johnson Medical) as ROMAC Ambassadors.

Their support is greatly valued.

Past District Governor (D9680) Harold Sharp has also been generous with his advice and guidance in regard to fund-raising.

With the commencement of the new year, I'm also pleased to announce that Mr. Ron Delezio has agreed to take on the reins of Eastern Region Chairman, for the next three years. Ron is familiar with the workings of ROMAC, the hospital system in NSW and will be a great asset to ROMAC. I wish him well.

**Rob Wilkinson**



*A proud Rido, top right, told us that he hoped his scar won't go away!! Above left Reedly's physique and, below, saying farewell and thank you at the airport.*

# New Zealand

During the last Rotary year ROMAC New Zealand cared for 16 children from the Pacific Islands and around the wider Pacific rim; 11 children came from Vanuatu, two from Timor Leste and one each from Philippines, Fiji, Nauru and Indonesia.

Almost all of our children and their parents were looked after in Ronald McDonald House in Auckland to whom we remain grateful for their continued generosity and superb care of our ROMAC families during the often stressful weeks they both await and recover from major surgery.

This year for the first time, ROMAC NZ organised a training programme involving six nurses and one doctor from Vanuatu. See *'Matching and Global Grants'* opposite.

**Linda, top photo 'before' and below 'after' with Mum,** was born on Tanna island in Vanuatu with a very large encephalocele [brain hernia]. Her Mum Talia held a scarf across Linda's face to hide the deformity which was surgically excised by our neurosurgeon, Dr Peter Heppner at Starship Hospital.

Although Linda's eyesight could not be fully restored, she will continue to live a normal life with no impairment of her intelligence.

**Vicky, bottom photo, sustained 55% burns to her buttocks and legs in an horrific fire in Fiji in which her Mum died.** Vicki was transferred by air ambulance to the National burns unit at Middlemore Hospital in Auckland where she was placed in an induced coma for several weeks during which she was in theatre 16 times, of which eight were for grafting of her extensive and deep burns!

After 3 months in Middlemore, she was transferred, again by air ambulance, back to Lautoka hospital to be near her family.

I contacted Vicki's brother Gavindi after she had returned for a while and he tells me that she continues to progress really well. Vicki can walk a few steps now without crutches, and will return to school in the new year, walking unaided.

**Saky, photo next page, top, arrived from Vanuatu** with his Dad Benjamin unable to walk even a few steps as he was blue, breathless

and in severe heart failure!

He had a very unusual congenital heart problem and required several weeks of medical treatment before he was well enough for surgery, which proved quite a challenge to our cardiac surgical team led by Dr Kirsten Funicane. Within a very few days Saky was running around the wards and he and his dad returned to Vanuatu to meet Saky's new baby sister.

**Loren, photos next page 'before' and 'after', lives with her Mum and Dad who are subsistence farmers** in a very remote island in the Philippines, several kilometres from the dirt road leading to their nearest town. She also had an encephalocele with the brain tissue herniating into her face displacing her nose and eyes!

Our surgical team of Dr Peter Heppner, Dr Glenn Bartlett, Dr Jonathen Wheeler and Dr Zac Moaveni donated their time and wholly transformed this little girl's life.

Loren returned to school and for the very first time she has several new friends and was also crowned school Princess at their recent little pageant.

**Robert, photos next page 'before' and 'after', was born on the island of Tanna in Vanuatu, with two club feet.**

His village has no power and the only water is a central village tank. The nearest town and school are an hour's walk away, a very painful journey for Robert walking on the sides of his feet.

ROMAC brought Robert to Hamilton, New Zealand with his father Ialulu and they were hosted by Rotarian Michele Rees-Williams, a member of the Waikato Sunrise Rotary Club, with support from other club members.

Robert attended Melville Primary School while undergoing his lengthy treatment at the Orthopaedic Clinic of Waikato Hospital. The surgeon and hospital staff who treated Robert provided their services free of charge and his special splints were also provided free.

Sincere thanks to these health professionals, - Di Williams, Richard Willoughby and Colin Storey.

A number of clubs in District 9930 contributed to the support for Robert, and in





July 2014 he returned home, walking in a pair of shoes and very proud of himself.

**Dr Eric Horne**

## New Zealand's Matching and Global Grants

The Rotary year 2013-2014 saw the completion of Matching Grant 77738, the start of Global Grant 1415177, and the preparation of Global Grant applications for the coming year.

**Matching Grant 77738 was the first time Rotary Foundation had awarded a matching grant to ROMAC.**

This grant was to fund cardiac surgery for two children from Vanuatu suffering from Rheumatic Heart Disease and to provide training for four health care personnel from Vanuatu in preventing and treating Acute Rheumatic Fever.

**The two children were Victor Mete and Cable Abel.**

Victor was treated successfully and went home during the year 2012-2013.

Cable arrived in Auckland in May 2013 but he was so ill that his surgery was not possible until the end of June and his recuperation took until the end of August. He was looked after by the Rotary Club of Devonport and returned home with his grandfather on August 25<sup>th</sup> 2013. The photograph (*next page*) shows Cable with his grandfather at Auckland airport waving goodbye to their ROMAC friends.

**The other major part of this matching grant was the training of health professionals from Vanuatu.**

Training is important to achieving the “sustainability” requirement of Rotary Foundation grants, without which it is not possible to win such a grant.

**During the first two weeks of September 2013, ROMAC brought five registered nurses and one doctor to Auckland for Rheumatic Fever Education as part of Rotary Matching Grant 77738.**

A major aim of the training programme was to empower these health professionals to create self-sustainability by giving them knowledge and skills to solve problems in their own country and the tools of trade for their work with a focus on improving cardiac health in their community.

The final report for this Matching Grant was prepared and accepted in April 2014, having laid the ground for the following Global Grant application to the Rotary Foundation.

Towards the end of 2013 an appeal was made to Rotary clubs in District 9910 to support a Global Grant application for ROMAC. 22 Clubs responded and contributed between them US\$23,167. The clubs were *Bay Of Islands, Birkenhead, Browns Bay, Dargaville, East Coast Bays, Henderson, Kaikohe, Kaitaia, Kerikeri, Milford, New Lynn, Norfolk Island, Northcote/ Glenfield, North Harbour, Takapuna, Waipapa, Waitakere, Warkworth, Western Springs, Whangarei, Whangarei City and Whangarei South.*

**District 9910 contributed a further US\$24,000 to this grant application and thanks to the excellent efforts**



**of PDG Lindsay Ford, PDG Geoff Dainty, and ROMAC NZ envoy Youngshin Watkins, two Rotary Districts in Korea became partners with ROMAC.**

Korean District 373 contributed US\$50,000 and Korean District 3720 contributed US\$45,000.

Rotary Foundation matched the Club sums at 50% and the District sums at 100%, making a total Global Grant of US\$272,751. This grant application was submitted in January 2014 and approved on June 24<sup>th</sup> 2014.

**It is the largest Global Grant approved by Rotary International during the year.**

It will provide eight disadvantaged children from Vanuatu with life-saving and life enhancing cardiac surgery at Starship Hospital in Auckland New Zealand.

The aim is to prevent death or physical disability resulting from two main causes - congenital heart deformities from birth and Rheumatic Heart Disease caused by Acute Rheumatic Fever.

**This grant will also provide training for health professionals from the areas where these children live in Vanuatu, to assist in diagnosing and treating similar cases in their community at**



*Cable with his grandfather*

**an early stage.**

Rheumatic Heart Disease can be prevented if the adults in a community know what to look for, and it can be treated with antibiotics if it is diagnosed early, so avoiding the need for surgery. Genetic heart disorders can be diagnosed at birth and treated early to avoid serious problems.

The first of the children to be treated as part of this grant arrived in Auckland during September 2014, and the training programme will take place in early 2015.

**There is considerable excitement amongst ROMAC supporters to continue with further Global Grants during the coming year. Three Rotary districts in Korea have contributed between them US\$105,000 to the new grant applications, namely D3730, D3720, and D3620.**

And three Rotary districts in New Zealand have contributed between them US\$38,000, namely D9910, D9920 and D9930.

We hope that more Districts in New Zealand will contribute, and a contribution from Districts in Australia would be more than welcome.

**Angela Bowey**

# Operations

This is my first report as Operations Director since taking over the position from Richard Woodburn at the last AGM. I wish to sincerely thank Richard for his on-going support and guidance and acknowledge his longstanding contribution and dedication to ROMAC. This year, Richard took on the role of Deputy Chair and has played a pivotal role with ROMAC's new eHealth integration that I will refer to later in this report.

***The Operations' role is to manage the logistics initiated by a referral to ROMAC, seek opinion and advice from our medical director, assess and place patients in regions and hospitals, work with our overseas ROMAC/Rotary representatives to obtain passports, prepare all documentation, arrange visas, coordinate with our Regional Chairs and arrange transport to ensure the patient and their guardian arrive and return home safely after treatment.***

The New Zealand team, in collaboration with the operations director, manage their logistics of hospital placement, passports, visas and transport to and from New Zealand.

I would like to extend my sincerest gratitude to our retiring Medical Director, Prof Andrew Rosenberg. His knowledge, vast experience and tireless effort have ensured I understood clearly each of our patients' medical conditions and consequently our likely challenges.

Prof Rosenberg works closely with our regional medical consultants who collectively provide the necessary medical expertise, advice and compassion in the challenging process of assessing and placing our referrals. Our Regional Chairs coordinate with the District Chairs to care for the hosting and transport needs of our patients and their guardians during their stay in Australia or New Zealand, often for periods of many weeks and sometimes several months.

***Many Rotarians assist with transportation to medical appointments, organise interpreters, support and care for the guardian and generally***

***provide the post-operative connectivity through visits and social outings.***

2013/2014 was again a very busy year, with ROMAC receiving 77 referrals for children in urgent need of assistance.

***In all 44 patients were treated for life saving or dignity restoring surgery. Plus two of these patients returned for further treatment.***

A continuing concerted effort ensured we found a number of longer standing cases (often difficult within our remote island nations) and they were accelerated through to surgery with great outcomes.

During the year 33 children were ineligible, as they did not fit ROMAC guidelines. A number of these received treatment in their own country and others were referred to other appropriate organisations on the advice of our medical director and medical consultants.

***Over the years, as a result of health facilities gradually improving in many of our source Pacific Island countries and surgical teams visiting more frequently, a greater proportion of referrals to ROMAC are far more complex and hence very costly.***

Our cardiac cases often require paediatric ICU (PICU) facilities and ROMAC is very grateful for

the continuing support of the Starship in New Zealand and the Australian Children's Hospitals. We are very pleased to report that both Sydney and Melbourne have reopened beds for paediatric cardiac patients while the Mater in Brisbane continued its excellent support. Accurate diagnosis of cases (especially cardiac) prior to patients coming to Australia and New Zealand is vital to negotiate hospital placements, provide reasonable accurate estimates and minimise unforeseen complications.

***This accurate diagnosis is also a serious challenge for many island medical staff due to poor or unavailable diagnostic equipment and, especially, suitably qualified paediatric staff.***

In some cases children are brought to Australia or New Zealand for diagnostic assessment to determine if ROMAC can assist with surgery at a later time. ROMAC successfully trialled a visit to Dili by Darwin based Paediatric Cardiologist Dr Bo Remenyi in June 2013 to



*Bras with mum Ervina and ROMAC's Sandra Mahlberg.*

***“There are often last-minute complications... or deterioration in the client's condition. Our staff work closely and flexibly with ROMAC to ensure these children get the critical treatment they need.”***

*Australian Department of Immigration and Border Control Annual Report 2013/14.*

conduct echo scans and provide reports. Due to great outcomes, this was repeated in May 2014. New Zealand Paediatric Cardiologist Dr John Stirling regularly visits Vanuatu to do similar and successful assessments. ROMAC is very grateful for their support.

***This past year Vanuatu and Timor Leste were the major source of patients seeking ROMAC support. In November 2013 our medical director, Prof Rosenberg and I travelled to Darwin and Dili to better understand the problems associated with assessment and logistics of bringing children from Timor Leste to Australia and New Zealand.***

We met with RAWCS representative PP Daryl Mills OAM and his staff who work tirelessly to find and contact patients and their families, obtain visas and make all arrangements for travel.

Discussions also occurred with medical staff who refer patients to ROMAC - Dr Ingrid Bucens and Prof David Brewster from Dili National Hospital as well as Dr Dan Murphy from the Bairo Pite Clinic.

During the visit we had the opportunity to personally thank ConocoPhillips' Dili manager, Paul Graystone for supporting ROMAC children by generously providing patient-flights between Dili and Darwin.

On the same trip, Prof Rosenberg and I visited Royal Darwin Hospital and met with Dr Charles Kilburn to discuss available paediatric facilities, the ability to assess patients or stabilise them for ROMAC on route to mainland hospitals. Regional Imaging was also thanked for their ongoing ROMAC support.

***We also visited Darwin Rotary Clubs and personally thanked ROMAC stalwart supporters Rod Meyers, Jim Wright and our valued Timorese interpreter Marie Jelliff, for their continued exemplary service with transiting patients and their carers through Darwin, no matter the time of day or, more frequently, late at night.***

To improve patient management ROMAC has commissioned a new eROMAC database system, making it easier to archive and search old files and more efficiently manage our current cases. This is being integrated with our medical database and soon will

incorporate our website to provide electronic referrals, minimise data challenges and improve communications through video conferencing.

***The eROMAC health system has been a long-term significant undertaking by ROMAC and is already providing visible benefits by maintaining segregated case records and medical documents for each patient within a single file.***

Patient snapshots feature on all case files to personalise and help confirm identity. Improved privacy and security of patient files and photos is an integral part of the new system. Credit and thanks for this intuitive system go to the foresight of several ROMAC boards, developers at AuraAccess and in particular to the design, development and support team of Tim Jupe and Sam Edge who have provided excellent understanding and collaboration with ROMAC.

***I wish to acknowledge the enthusiastic support in our source countries of Rotarians, ROMAC medical consultants and many other volunteers.***

They are paramount to ROMAC identifying and vetting potential patients, and then organising passports, medical assessments, visas and travel arrangements for these children, many of whom live in incredibly remote locations.

***Without dedicated caring people like Daryl Mills OAM, Dr Ingrid Bucens and Prof David Brewster from Timor Leste, Craig Brouggy and Prof John Vince from PNG, PDG Wayne Morris, Dr Nathan Kere and Dr Titus Nasi from the Solomon Islands, Janet Kalpukai and Dr Richard Tatwin from Vanuatu (including Don MacRaild OAM), Dr Ram Raju from Fiji and dozens more, many children would miss out on life-saving or dignity restoring surgery.***

As well as Rotary, a number of businesses such as Johnson & Johnson Medical, ConocoPhillips, Regional Imaging in Darwin and Solomon Airlines actively support ROMAC in many ways.

***The Australian Department of Immigration and Border Protection always assist ROMAC to ensure visas are granted to meet many of our demanding lifesaving surgery arrival deadlines. Likewise, Immigration New Zealand now***



*Grandmother Brigida with Erneo*

***“In one extreme case Australian Immigration officers in Dili beat the clock to help ROMAC airlift a 10-month-old baby (Ernio) to Sydney for critical open heart surgery. That visa and operation literally saved little Ernio’s life.” Australian Department of Immigration and Border Control Annual Report 2013/14.***

*often issue urgent visas within hours while our Pacific Island Nation Governments support ROMAC by ensuring passports are issued promptly. Thank you one and all.*

Dr Eric Horne has been involved with ROMAC since its inception in New Zealand and will be taking over the medical director role from Prof Andrew Rosenberg after this AGM and I am looking forward to working with Eric.

My sincere thanks to Bryan Mason, well known to many ROMAC supporters, for providing support and sharing his vast historical knowledge of ROMAC.

To my fellow ROMAC Board and Operations' members, I thank you for your energy, selfless support and dedication.

To our regional medical consultants and our regional chairs, Dr Eric Horne and Angela Bowey in New Zealand; Margaret Hayes in Northern; Rob Wilkinson in Eastern; Gaynor Schols in Southern; Alun Hughes in Central and Peter Snell in Western who coordinate the needs of our patients and their guardians whilst away from

their homeland – they perform a demanding service and are well supported by our district chairs and their tireless committees. I thank you one and all.

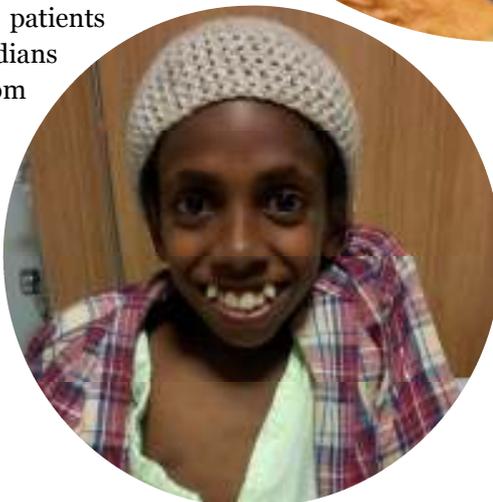
ROMAC saves lives through a small army of volunteers throughout Australia, New Zealand and the countries we serve.

ROMAC is proud of the doctors and associated medical staff that freely supports our children as well as the world class hospitals and staff who provide excellent lifesaving facilities.

*We have been gradually establishing MoU's with a number of hospitals and identified logistical improvements that follow, seen greater efficiencies through team collaboration, triggering more enthusiasm and staff pride.*

ROMAC is regularly talking to more potential hospitals and discussing the mutual benefits of establishing similar MoU's – it is a win/win for both parties with total focus on the children and outcomes.

**Barry Wilson**



*Top ROMAC's Barry Wilson farewelling Timor Leste's Erneo, at the airport who was treated for a heart condition. Below left Vanuatu's Reedly treated for gastrointestinal and, right, Jimaro from Nauru who had a tumour removed.*

**“Erneo’s case was particularly sensitive and it appeared that all odds were against him - he is from a single-parent family and his mother juggles work and parenting on less than US\$1 per day.”**

*Australian Department of Immigration and Border Control Annual Report 2013/14.*

# Patients treated 2013/14

Patient	Country	Case	Region	Hospital Name	Sponsor Club	Status
Anastacio	Timor Leste	Urology	Central	Memorial, Adelaide	Hallett Cove	Completed
Anna	Vanuatu	Burns	Eastern	Children's-Westmead	Northbridge	Completed
Bakita	Timor Leste	Heart	Western	Princess Margaret	Hilarys	Completed
Bianca	Vanuatu	Heart	New Zealand	Starship-NZ	Westhaven	Completed
Bras	Timor Leste	Gastrointestinal	Eastern	Canberra	Gunghahlin	Completed
Cabel	Vanuatu	Heart	New Zealand	Starship-NZ	Devonport	Completed
Degina	Vanuatu	Orthopaedic	Eastern	John Hunter	Adamstown NL	Completed
Edefizia	Timor Leste	Vascular	Eastern	Children's-Randwick	Cronulla	Completed
Edwin	Vanuatu	Orthopaedic	Northern	Mater-Brisbane	Moreton Bay	Completed
Edwin	Vanuatu	Orthopaedic	Northern	Mater-Brisbane	Windsor	Completed
Enilokeli	Tonga	Vascular	Eastern	Children's-Westmead	Liverpool	In Progress
Erneo	Timor Leste	Heart	Eastern	Children's Randwick	Sydney	Completed
Esmael	Timor Leste	Heart	New Zealand	Starship-NZ	Browns Bay	In Progress
Francisca	Timor Leste	Orthopaedic	Eastern	Children's-Randwick	Sydney	Completed
Gelina	Timor Leste	Heart	Northern	Mater-Brisbane	New Farm	Completed
Jeremy	Vanuatu	Heart	New Zealand	Starship-NZ	Halfmoon Bay	Completed
Jimaro	Nauru	Tumour	Northern	Children's-Brisbane	Bribie Island	In Progress
Jofi	Timor Leste	Heart	Northern	Darwin Hospital	Cleveland	Completed
Jofi	Timor Leste	Heart	Northern	Mater-Brisbane	Cleveland	Completed
Justin	Fiji	Orthopaedic	Eastern	Children's-Randwick	Corrimal	Completed
Linda	Vanuatu	Encephalocele	New Zealand	Starship-NZ	North Harbour	Completed
Linh Da	Vietnam	Craniofacial	Southern	Monash Medical	Brimbank Central	In Progress
Loren	Philippines	Encephalocele	New Zealand	Starship-NZ	New Lynn	Completed
Macho	Nauru	Heart	New Zealand	Starship-NZ	Onehunga- OTH	Completed
Natalina	Timor Leste	Neurosurgery	Northern	RCH Brisbane	Port of Brisbane	Completed
Natalizio	Timor Leste	Heart	New Zealand	Starship-NZ	Browns Bay	In Progress
Neha	Fiji	Burns	Eastern	Children's-Westmead	North Ride	Completed
Nurak	Vanuatu	Orthopaedic	Eastern	John Hunter	East Maitland	Completed
Parency	Vanuatu	Heart	New Zealand	Starship-NZ	Halfmoon Bay	Completed
Philip	Vanuatu	Orthopaedic	Southern	Epworth-Vic	Doncaster	Completed
Rafika	Indonesia	Burns	Northern	Children's-Brisbane	Gloucester	Completed
Reedly	Vanuatu	Gastrointestinal	Eastern	Canberra	Gunghahlin	Completed
Reinaldy	Timor Leste	Gastrointestinal	Eastern	Canberra	Gunghahlin	Completed
Rexly	Vanuatu	Heart	New Zealand	Starship-NZ	E C Bays	Completed
Rickson	Vanuatu	Heart	New Zealand	Starship-NZ	New Lynn	Completed
Rido	Indonesia	Heart	Eastern	Children's-Westmead	North Ryde	Completed
Robert	Vanuatu	Orthopaedic	New Zealand	Hamilton NZ	Waikato Sunrise	In Progress
Roberta	Fiji	Burns	Eastern	Children's-Westmead	North Ride	Completed
Roslinda	Vanuatu	Heart	New Zealand	Starship-NZ	Milford	In Progress
Saky	Vanuatu	Heart	New Zealand	Starship-NZ	Milford	Completed
Specialina	Nauru	Heart	Northern	Mater-Brisbane	Jindalee	Completed
Tomas	Timor Leste	Wilms Tumour	Central	Woman & Children's	Brownhill Creek	Completed
Two-J	Nauru	Heart	Northern	Mater-Brisbane	Ashgrove/ The Gap	Completed
Uswatun	Indonesia	Burns	Northern	Children's-Brisbane	Gloucester	Completed
Victoria	Fiji	Burns	New Zealand	Middlemore	Mgree/Ptoe	Completed
Virtanata	Indonesia	Urology	New Zealand	Starship-NZ	New Lynn	Completed

# ROMAC Board

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