



DAISI

*Doctors Assisting In South-Pacific Islands*

# Working **with ALL our** **South-Pacific** **Neighbours**

Annual Report 2018

**DOCTORS ASSISTING IN SOUTH PACIFIC ISLANDS (DAISI)****Head Office**

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St Leonards NSW 2065

**Mail address**

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**Unincorporated charity**

DAISI is a not-for-profit, Unincorporated Company.

Board Members are our current Directors.  
Registered charity with the Australian Charities and Not-for-Profits Commission (ACNC) from 26 January 2016.

**Tax concessions and fundraising**

Endorsed by the Australian Taxation Office as:

- a Deductible Gift Recipient (DGR); and
- an income tax exempt charity (holding tax concessions and exemptions relating to income, goods and services, and fringe benefits taxes).

**Accreditation**

A registered Not-for-profit charity with the Australian Charities and Not For Profits Commission (ACNC).

**Feedback and complaints**

Feedback on this report and on our operations and conduct more generally can be sent to [staff@daisi.com.au](mailto:staff@daisi.com.au) or in writing to:

DAISI PO Box 679 Crows Nest NSW 1585

We will acknowledge feedback and give a response. Complaints relating to a breach of the ACFID Code of Conduct can be made to the ACFID Code of Conduct Committee.

**About this Annual Report**

This Annual Report covers our activities and performance for the financial year period 1 July 2017 to 30 June 2018.

It is our aim to be as transparent and accountable as possible to our donors and beneficiaries.

For our donors, this is our way of thanking you and

showing extreme appreciation for your generosity. It is also our way of showing the importance we place on reporting and obtaining audit of our activities, and satisfying our reporting obligations to all stakeholders, including donors, supporters, volunteers, partners, and everyone that has helped to make it work.

By showing our goals and activities, and high level of accountability with detailed annual reporting, we hope that we can inspire you, and continue to earn the trust that we have been privileged to have received so far.

We have also based this report on certain legal requirements expected of us by the ACNC and expected of all responsible charities according to the Code of Conduct of the Australian Council For International Development (ACFID).



**Dr Sepehr Lajevardi**  
Chair

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# Our Chair's Report



I am very honoured to have been elected Chair of DAISI in December last year, and although I began with big shoes to fill, taken over from outgoing Chair Dr Tim Nicholson, it has only been made possible with the incredible support of my elected office bearers. I am proud to have been part of some important changes to DAISI over the past year in my term of office.

## Working with all our South-Pacific Neighbours

The most exciting development has been the establishment of a memorandum of understanding (MoU) and working relationship with the Solomon Islands, Kiribati, Vanuatu, PNG and Tuvalu. By spreading DAISI's reach to these countries, the emphasis will be on quality tailored visits on the request of each specific country according to their specific needs.

## Volunteer Placements

This year alone DAISI has sent 18 volunteer teams to the South Pacific involving 52 volunteers: 36 doctors (including 9 anaesthetists, 15 surgeons and gynaecologists, 2 physicians, and 10 registrars). We have also had 7 nurses and 9 medical students attend trips to the South Pacific. Countries visited this year by DAISI volunteers include the Solomon Islands, Vanuatu, Kiribati & PNG. We also had a fact finding mission to Cook Islands, and AGM in Fiji.

## Laparoscopic Training

Laparoscopic training has been firmly established in Gizo and National Referral Hospitals in the Solomon Islands, with a planned laparoscopic teaching session in Vanuatu in January next year. Its main role has been in diagnosing the cause of abdominal pain when CT scanning is not available.

## DAISI Charity Ball 2018

After the incredible success of last year's DAISI Charity Ball with over \$30,000 raised, it was decided to continue this as an annual

event with this year's Charity Ball on Friday 7th December at the Sydney Hilton, with tickets available online at <https://daisi.com.au/charity-ball/>. All money raised will go towards medical supplies for Kilu' ufi Hospital in the Solomon Islands.

## Medical Student Rotations

DAISI has established links with Bond University on the Gold Coast and Notre Dame University in Sydney with 9 medical students attending volunteer trips to Solomon Islands and Vanuatu so far this year.

## Budget

DAISI has received this for the 2017-18 financial year \$105,288 in unsolicited donations. DAISI has spent a total of \$109,974. This money has gone towards sending DAISI teams and shipping containers of supplies to the South Pacific, with the next planned shipping container departing in November this year.

## Medical Supplies

DAISI is still very committed to the responsible donation of quality used medical equipment and medical supplies to the Pacific Islands that would otherwise become land-fill, and have clear policies on this matter. Supplies must be confirmed as wanted and must also be boxed and catalogued clearly to allow for ease of unpacking and storing on arrival.

## DAISI's AGM

Many issues were discussed at this year's AGM on the 3rd Oct at the Sheraton Resort and Spa, Denarau Island, Fiji, but the main one was the need for DAISI to provide quality services and donations where they are most needed and that these be culturally appropriate. Membership was discussed and it was agreed that "associate membership" would be allowed for non medical volunteers.

**Dr Sepehr Lajevardi**  
Chair



A photograph of a medical team in an operating room. Three healthcare professionals, two women and one man, are wearing blue scrubs and surgical caps. They are gathered around a patient lying on a gurney, which is covered with a green surgical drape. The patient's legs are extended. The woman on the left is looking down at the patient's leg. The man in the center is looking at a clipboard. The woman on the right is also looking at the patient. In the background, there is a sign that says "OPERATION" and some medical equipment. The text "Quality Services where they are Most Needed" is overlaid on the image in white and orange font.

**Quality Services where  
they are Most Needed**

# Regional Anaesthesia to Kiribati

**My visit to the republic of Kiribati (pronounce Kiri-bas) was a delightful follow-up to my initial involvement with DAISI one year ago to the Solomon Islands.**

The republic of Kiribati (population ~120,000) is between Fiji and Hawaii of USA. Basic development indicators for health, education and life expectancy in Kiribati are among the poorest in the Pacific region. Their medical graduates are from Cuba, Fiji or Papua New Guinea.



Tungaru Central Hospital, Kiribati is perilously located at sea level.

Kiribati is one of the Islands in the South Pacific most at risk from global warming and sea rise, with many of the islands becoming atolls, and then disappearing below the sea level.

After an exciting and nervous initial contact with the Director of Hospital services on the first day, it was apparent my visit became a regional anaesthesia workshop for the local anaesthetists and a cardiac ultrasound workshop for the local physicians.

Although I had brought a portable echo/ultrasound machine, their hospital was blessed with a nerve block machine donated by another Australian organisation and their echo machine from the Taiwanese team who regularly visits.

Regional anaesthesia workshop – Sonoanatomy of the upper and lower limb (peripheral nerves and plexuses) was demonstrated to the attendees. Needle techniques were practised and learnt by local staff quickly in order to provide complete Anaesthesia for numerous diabetic-related Debridements and multi-level amputations.

Cardiac ultrasound workshop – the combination of rheumatic heart disease and high rates of infectious diseases gave us plenty of opportunity to demonstrate How to perform a comprehensive

echocardiogram to assess and grade valvular pathologies and to look for echo signs of infective endocarditis to the local physicians. They do have the ability to then refer these patients out of Kiribati for definitive treatment in India, Fiji or Taiwan.

After more than 10 years of overseas aid work, it still never ceases to amaze me that there are a lot more facets of medicine to offer to different parts of underdeveloped countries. We aim to continue this relationship with Kiribati in 12 months time for more transfer of skills including the aim of introducing laparoscopic surgery.



Dr Harry Lam performs transthoracic echocardiography at Tungaru Central Hospital, Tarawa, Kiribati.



# Prevention **and** Early **Detection**

Cardiology Registrar Dr Daniel Chen at Gizo Hospital, Solomon Islands establishing the first Cardiac Stress test laboratory.



# Establishing a Cardiac Stress Test Laboratory in Solomon Islands

**I was fortunate to be part of this one week DAISI cardiology trip to Gizo hospital with interventional cardiologist Dr James Weaver from St George Hospital, Sydney).**

It was my final year, and a great chance to finally give back after so many years of training.

We worked together with Dr Allen Alepio (local physician from the NRH in Honiara), Oliver Archer (cardiac sonographer), and Peter Taylor (non-medical team member from V Medical).



Cardiology registrar Dr Daniel Chen with Cardiologist Dr James Weaver in front of Gizo Hospital.

Together we conducted a cardiac assessment clinic at the Gizo Hospital, which saw more than 50 patients over a two-day period.

The majority of the work focused on screening, diagnosing, and managing rheumatic heart disease and ischaemic heart disease, which are quite prevalent in the Solomon Islands.

Oliver performed 30 echocardiograms using a mobile cardiac ultrasound machine, which was on loan from Philips Australia.

Peter Taylor from V Medical donated a treadmill exercise stress test machine and computer system, and was part of this team to assemble and set up the equipment at the Gizo Hospital.

This new equipment allowed the clinic to perform more than 10 exercise stress tests, and will continue to allow local physicians to utilise it in assessing chest pain presentations in the future. It was exciting to see that so much was able to be achieved with very little output in expense.

Dr Weaver and I plan to return on an annual basis for future clinics, and it is hope that we can, with time, advance the cardiac services to the Solomon Islands so that when significant pathology is encountered, it can actually be treated locally and in an affordable manner.

At the moment, there is no interventional cardiology in the Solomon Islands, and it would be our aim to introduce simple interventional cardiology and treatments that give good return, such as pacemaker insertion for arrhythmias.

Although valvular disease remains very common in the Solomon Islands, the facilities are not yet ready for valvuloplasty, as in the rare event that there is a complication during this procedure, there must be immediate open cardiac surgery back up options available.

Currently these cases are instead triaged, and sent to Australia for interventional treatment. The problem with this, is that often treatment is given quite late once advanced heart failure has already occurred. It is also incredible expensive. This does not translate into money well spent.

Ideally, if these services could pick up early disease, then this could be treated locally, it would translate into huge savings for the Solomon Islands.

There is still a long way to go, but the enthusiastic reception we received, and the incredibly huge demand for cardiac assessment and treatment in the Solomon Islands, will likely make this program successful in the long term.

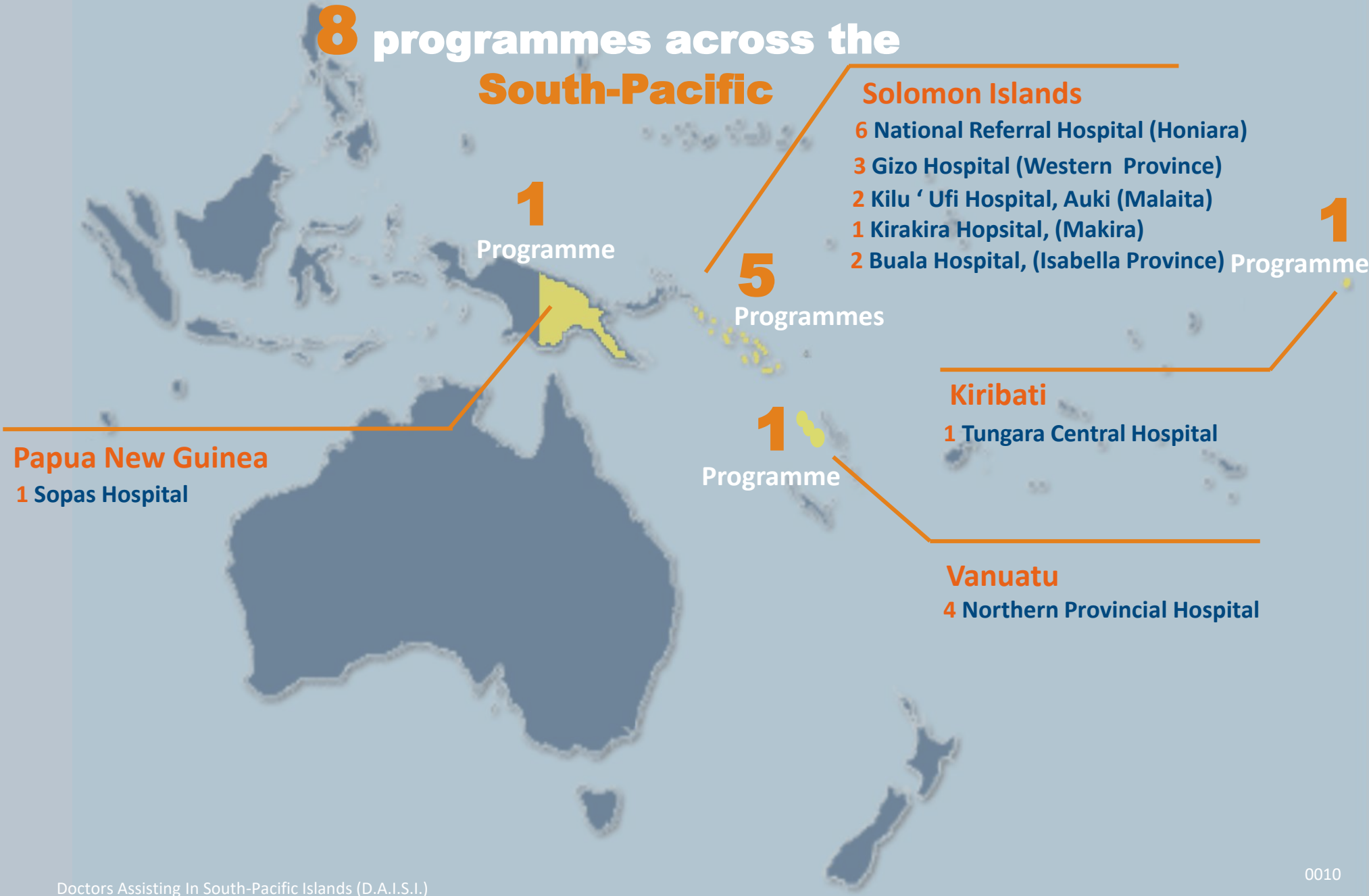


A photograph of surgeons in an operating room. Two surgeons in the foreground are wearing masks and caps, focused on a patient. A third surgeon is visible in the background. Medical equipment, including a monitor showing vital signs, is visible in the background. Surgical instruments are laid out on a table in the foreground.

# Projects

Annual Report 2018

# 8 programmes across the South-Pacific



# 18 trips & 52 volunteers this year

## 12 Total trips

### Solomon Islands

- 1 gynaecology (Gizo)
- 1 general surgery (Gizo)
- 1 cardiology (Gizo)
- 5 general surgery (Honiara)
- 1 diabetic foot clinic (Honiara)
- 1 general surgery (Buala)
- 1 gynaecology (Kirakira)
- 1 general surgery (Auki)

## 1 Total trip

### Kiribati

- 1 colorectal (Tungaru)

## 4 Total trips

### Vanuatu

- 2 general surgery (Luganville)
- 1 head & neck (Luganville)
- 1 O&G (Luganville)

## 1 Total trips

### Papua New Guinea

- 1 colorectal & laparoscopic (Sopas)



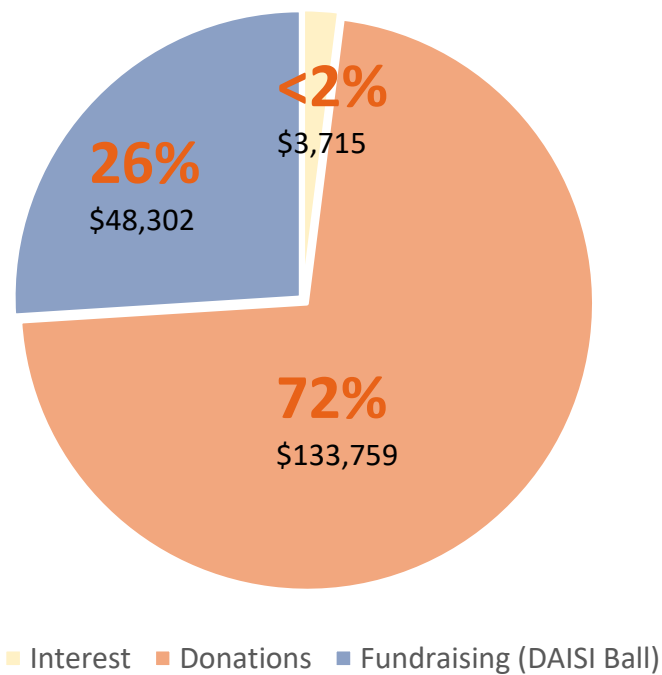


**Finance**

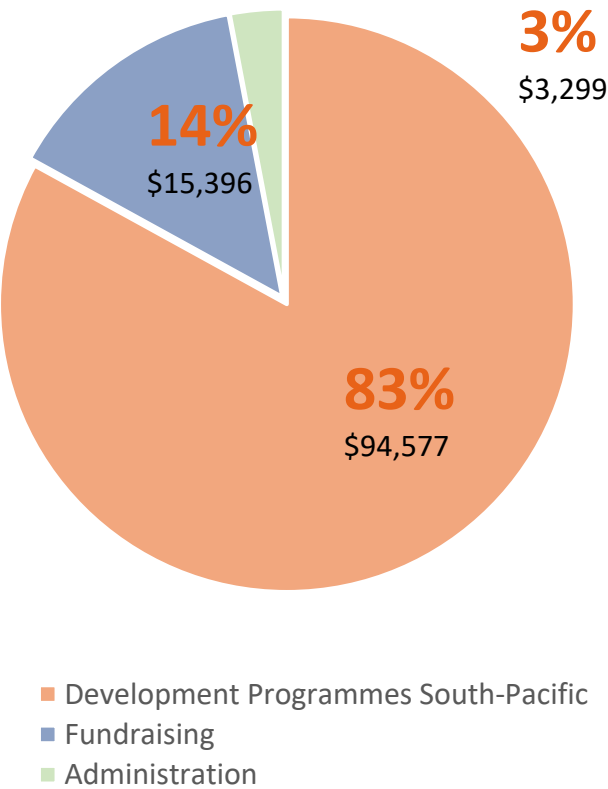


# How Funds Were Spent (2017/2018 Financial Year)

Income \$105,288



Money Spent \$109,974



# Statement of Financial Position (End 2017/2018 Financial Year)

Total Assets	\$1,013.00 [1]
Total Liability	\$0.00 [2]

1. At end of financial year 30<sup>th</sup> June 2018 DAISI had no liability  
2. At end of financial year 30<sup>th</sup> June 2018 DAISI had total assets of \$1,013.00



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MEMBER



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