DAISI

& Education

Annual Report 2016



Head Office

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Mail address

DAISI - PO Box 679 Crows Nest NSW 1585

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 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 2015 to 30 June 2016.

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).

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Dr Tim Nicholson Chair

Contents

Service Delivery & Education	01		
Chair's Report	04	Projects	09
		Programmes	010
Compassion, Cooperation & Coordination	05	Trips & volunteers this year	011
		Shipping of Medical Supplies	012
A Partnership	06	Items donated to Gizo Hospital this Year	013
Memorandum of Understanding with	07		
Solomon Islands Ministry of Health		Finance	014
		How Funds Were Spent	015
Protecting those Most Vulnerable	08	Statement of Financial Position	016
The vulnerable and Maginalised	09		

Our Chair's Report



I have great pleasure in presenting DAISI's first annual report on progress since DAISI was formed almost one year ago. It has been a busy year 19 volunteers, and three specialty trips in urology, oro maxillofacial surgery, gynaecology and colorectal surgery. We have seen a rapid growth of DAISI membership and alliances formed with existing charities, with the generosity and support of so many people quite inspiring. Our aim this year has been service delivery and education/support.

Specialist Visits

DAISI has become a key participant in the Solomon Islands Ministry of Health with its main emphasis on surgical training. This is due to the fact that most DAISI members are from a surgical background. I myself a urologist, have been able to visit Gizo hospital three times in the past two years to teach urology. Our Secretary, Colorectal surgeon Dr Gary Mckay, has this year visited Gizo on two occasions and Honiara once to perform and teach surgery.

This year we have had had three speciality trips to Gizo Hospital with over 19 volunteers with very strong involvement from gynaecologist Dr David Knox, Oromaxillofacial Dr Anne Collins, and a number of colorectal surgeons. We strongly encourage non-surgical doctors to participate, and (despite our name) even non doctors. The involvement of local Solomon Island trainees in this process is fundamental, with great success already in gynaecology, general surgery and anaesthetics both at Honiara and Gizo hospital.

Peripheral Hospitals

DAISI hopes to strengthen support for many of the other peripheral hospitals in the Solomon Islands often doing it tough with limited staff and resources.

Endoscopy Training

Endoscopy training in urology, gynaecology and general surgery has been a major focus of DAISI this year, with cystoscopy, laparoscopy, gastroscopy and colonoscopy taught to trainees during recent visits to Gizo and Honiara. DAISI has joined forces with the Australia and New Zealand Gastroenterology International

Training Association (ANZGITA) with a shared focus on improving endoscopy Services in the Solomons. It is currently grappling with the best way to see utilisation of endoscopic surgery in affordable and safe manner.

Medical Students Rotations

DAISI has had a steady stream of medical students volunteering this year, and we continue to encourage this, as it not only provides a life changing experience for those volunteering, but provides much needed assistance where personnel on the ground are often limited. Our vice-chair, Gareth Iremonger, a medical student himself when joining DAISI, and Dr James Fink from Bond University have been instrumental in coordinating medical student electives. All medical students must be supervised by a qualified doctor during these electives.

Donations

The donation of a 40 foot shipping container of surgical equipment and the purchase of surgical gowns urgently needed at National Referral Hospital (NRH) due to mildew outbreak was only possible due to the collaboration and generosity of organisations such as MedEarth, Rotary club of Berrima District, and Ramsay Health. We are developing policy to ensure the responsible donation of equipment that will be useful, environmentally friendly and that will not just end up as landfill.

Membership

Memberhsip is open to any doctor or medical student that has volunteered in the Solomon Islands and is committed to ongoing volunteering in the Solomons in keeping with the ethos of DAISI. Associate membership is available for non medical volunteers. We have decided to allow membership to remain free of charge.

Future Direction

DAISI is currently collaborating with National Referral Hospital (NRH) to organized regular endoscopy and laparoscopic workshops, and an Australian electives program for surgical registrars in the Solomon Islands.

Dr Tim Nicholson

DAISI Compassion & Coordination **Annual Report 2016**

A Parternship

Obstetric and Gynaecological services in the Western Province were identified by the Ministry of Health as areas in dire need of improvement.

With a formal invite for DAISI involvement in the Western Province, from the Minister for Women's Services, DAISI set about collaborating with its gynaecological colleagues, and together with the Director for O&G Dr Leeanne Panisi, implemented a roster for planned combined O&G trips for 2016.



Gynaecologists Dr David Knox, Pat Chan & Briley Pinea at Gizo Hospital in the far Western Province

These combined Gynae trips are a great demonstration of what can be achieved with partnership. In fact, they have even set the bench mark for subsequent surgical trips!

Prior to each DAISI visit, the local O&G team will keep a log of cases that require specialist input. With now are regular roster for upcoming DAISI visits, this allows patients to be advised when the next team will visit Gizo hospital, and to expect a call. For those without a telephone, they are given a precise date to turn up for their planned assessment.

It is imperative that assessment and surgery by specialists are offered on the same visit, as many of these patients have to travel, at great expense from their remote villages in Western Province. In one case, a patient spent all day coming by road and then paddle canoe!

The assessment is done by DAISI and the specialist O&G team from Honiara. This is important, as the local specialists have great insight into what is achievable (with the limited resources) and what case should be deferred or referred onto National Referral Hospital. It is also a wonderful team building exercise where DAISI and Honiara MOH specialists can get to know each other and become familiar with nuances. This screening aspect of the visits is perhaps even more important than he actual operative phase of the visit, as it is during this screening that critical decisions about what and when to operate.

The next most important aspect of these trips is the debrief at the end of the trip, as this is where we reflect on what went well and what needs further improvement. This must be done in a formal manner with permission given to the traditionally polite Solomon Islanders to provide constructive criticism. This must be done will all involved in the visit present.

This is then formalised as a written report by the NRH gynae team back to their executive and likewise by DAISI volunteers, to ensure that lessons learnt are acted on before the next planned trip.



The visiting Gynae team is at the formal farewell at the end of their visit to Gizo Hospital.

Memorandum of Understanding with Ministry for Health

DAISI is pleased to announce this year the establishment of a Memorandum of Understanding (MoU) with the Solomon Islands Ministry of Health.

DAISI's volunteer Nili Hali, a lawyer who drafted DAISI's first Memorandum of Understanding (MoU) with the Solomon Islands Ministry of Health (MOH) believes that "charities cannot be effective working in isolation and cannot achieve lasting change without working with and alongside a country's existing government and infrastructure where education is it its core".

By working with the Solomon Islands Ministry for Health in all future programs, there will be a shared sense of responsibility for the planning, implementation, and success or failure of projects.

Chair of DAISI Dr Tim Nicholson, believes this shared approach will lead to improved organization of DAISI visits, with greater ownership and therefore involvement of local doctors. It makes it clear what is expected of each partner, who is responsible for what. This is particularly important during emergency medical response and disaster relief response where unforeseen expenses are likely to be encountered

The old Gizo hospital's unfortunate burning down this year and the combined DAISI and MoU response at the time is case and point.



The Burning down of old Gizo Hospital this year resulted in coordinated response by DAISI and MOH thanks to the existing MOU.

This MoU gives clear guidance of what is expected by DAISI and its partners, and codes of conduct to be adhered to, as well as complaints process should a grievance arise. It is an absolutely necessary component of ensuring good governance.

Although it was our first attempt at an MoU, with multiple revisions and resubmissions required, it is now signed and a binding agreement. Although likely to be revised and added to in the years to come, it is nonetheless a necessary starting point, and a great achievement being signed by the Permanent Secretary Hon Dr Tenneth Dalipanda, the CEO of National Referral Hospital Dr Steve Aumanu, The Medical Superintendent and Head Surgery Dr Rooney Jagilly, the head of Gynaecology Dr Leeanne Panisi and all the DAISI Executive/Board members.

This legal document also legitimises the presence of DAISI volunteers in combined activities with the Solomon Islands Ministry of Health, should any.



Medical retrieval out of Gizo of critically injured patient - a joint project of DAISI and the Solomon Islands Ministry of Health (MOH).

complication, mishap or complaint arise, and is necessary for the protection of DIASI members.

It also validates that DAISI is actually wanted in the Solomon Islands enough for the MOH to agree in writing to a binding MoU that makes significant requirements of both parties. .

The specifics of future trips, shared costs, and responsibilities will still need to be discussed in many cases on a cases by case basis, but at least now the principles and basic rules of engagement are agreed upon.

Protecting those Most Vulnerable

DAISI

Annual Report 2016

The Vulnerable and Marginalised.

The most vulnerable and marginalised are those in need of additional protection and include women and children and all minority groups.

This year DAISI has emphasised its trips to the remote Western Province of the Solomon Islands, where the emphasis was on improving vital services for disadvantaged women and children and other marginalised groups.

Other minority groups in the Western Province doing it tough include those disabled by diabetes, often sustaining lower limb amputation, yet not having the necessary mobility aids to maintain any form of independence. This is often catastrophic, with complete inability to earn a living or be a productive member of society.

Sexually transmitted diseases (STDs), including HIV, Gonorrhoea, and Chlamydia, and HPV remain a serious cause of morbidity and silent suffering amongst women, as there is still significant shame associated with presenting for help with these "life-style" conditions.

Pelvic Inflammatory Disease (PID) can be a brutal consequence of STDs and/or endometriosis that exclusively affects women, and is often the cause for chronic pelvic pain and repeated presentations to hospital and significant morbidity amongst women. Without key-hole laparoscopic surgery the diagnosis and treatment is often not possible.

Neonatal mortality is another direct corelate of maternal health care. As one declines, so too does the other.

Child labour and prostitution are not well reported in the Solomon Islands, with a lot of this behaviour still very covert and much under the radar. Western influences and tourism have played their part in condoning and promoting such abuse.

Ethnic minorities are also not spoken much about, although there are certainly Provinces within the Solomon Islands with far greater wealth than others. This climaxed in a class war was most notable during the China Town riots and burnings in 2006 in response to the growing number of traditionally poor Malaitans occupying land and beginning business in the much wealthier Guadal Canal.

Those discriminated against based on their sexual orientation are likely to be underestimated in a predominantly Christian society where homosexuality is strictly forbidden and largely a taboo topic.

Mental illness, not surprisingly, gets the left overs when it comes to Government funding and support. In many cases those with mental illness are demonised in Biblical fashion, rather than receiving the necessary medical attention they deserve.

DAISI's aim is to walk that narrow tight-rope, remaining collegiate, and non political/religious in keeping with its constitution and ethos, but also helping and campaigning, and at times agitating for those most vulnerable and marginalised.

This year DAISI has had three specialist trips with nineteen volunteers to Gizo, the largest of which was a gynae & obstetric specialty trip. More women presented with gynaecological conditions than could be met, and many had to be turned away. Regrettably advanced inoperable cervical cancer in young women that could be prevented with public health campaigns aimed a increasing knowledge on barrier contraception, and implementing regular PAP smear screening that are sadly lacking. Surgeries performed included those due to chronic adhesion, tubo-varian abscess due to chronic pelvic inflammatory disease (PID) from STDs such as chlamydia and gonorrhoea.

This year a 40 foot shipping container was sent to Honiara, which included, amongst other things, obstetric and neonatal surgery and monitoring equipment. A large number of wheelchairs, crutches and mobility aids for the disabled.

Laparoscopic (key-hole) equipment aimed at making diagnostic laparoscopy more was also included in the container. This will make the assessment of chronic pelvic and abdominal pain in women due to PID and gynaecological conditions much easier.

This years burning of the old Gizo hospital is a major loss to many preventative and psychiatric services which had been operating until this year out of the old hospital building. It is DAISI's aim to increase it psychiatric emphasis for future volunteer trips.

The gap between those with and those without, is still quite large, and DAISI will do its utmost to ensure that it continues to provide its services where they are most needed, giving particular emphasis to the most vulnerable and marginalised in the Provinces.



Projects this year at Gizo

Annual Report 2016

3 Specialist Trips & 19 volunteers this year

Gizo Hospital Solomon Islands

- 1 Urology
- **1** General surgery, Oro Maxilofacial
- 1 Gynaecology

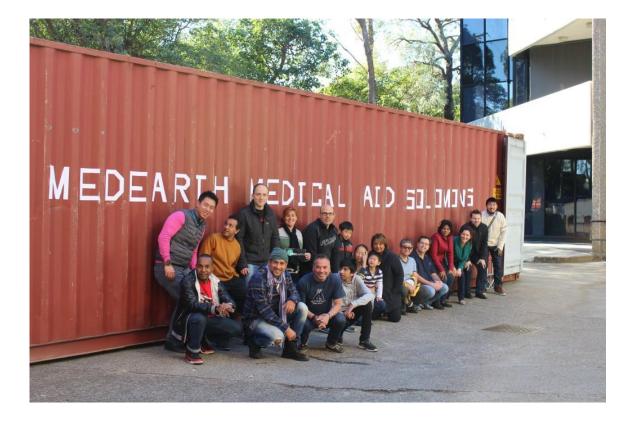
Shipping of Medical Supplies

Reclaiming and shipping medical and surgical supplies and equipment from Australia, to the Solomon Islands has been the other major objective this year. This must be done responsibly with particular concern for the environment.

This equipment, although fully functional, is donated to DAISI. Therefore the only cost involved for DAISI is in shipping the equipment and ensuring ongoing maintenance.

All equipment is confirmed by beneficiaries to be actually required, ensuring no waste. This equipment is then catalogued and packed appropriately to ensure that it is easily unpacked, stored and used in the receiving country.

This financial year, one 40 foot shipping container was sent to National Referral Hospital, Honiara, in the Solomon Islands, containing essential surgical supplies, medicines, and surgical equipment



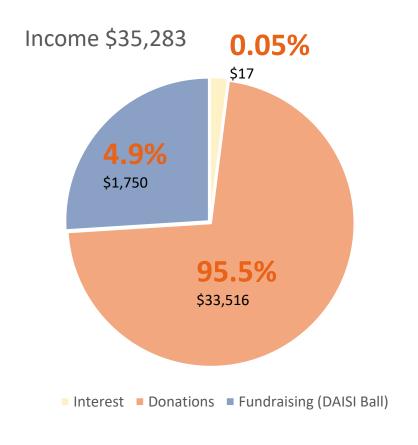
The first 40 foot shipping sent to the Solomon Islands, where DAISI has focused on surgical education introducing laparoscopic surgery programme.

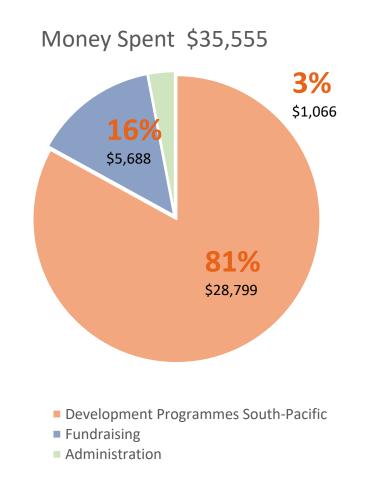
Items donated To Solomon Islands this year





How Funds Were Spent (2015/2016 Financial Year)





Statement of Financial Position (End 2015/2016 Financial Year)



- 1. At end of financial year 30th June 2016 DAISI had no liability
- 2. At end of financial year 30^{th} June 2016 DAISI had total assets of \$5,722.00



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