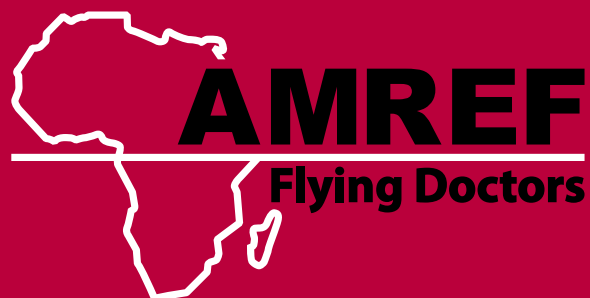
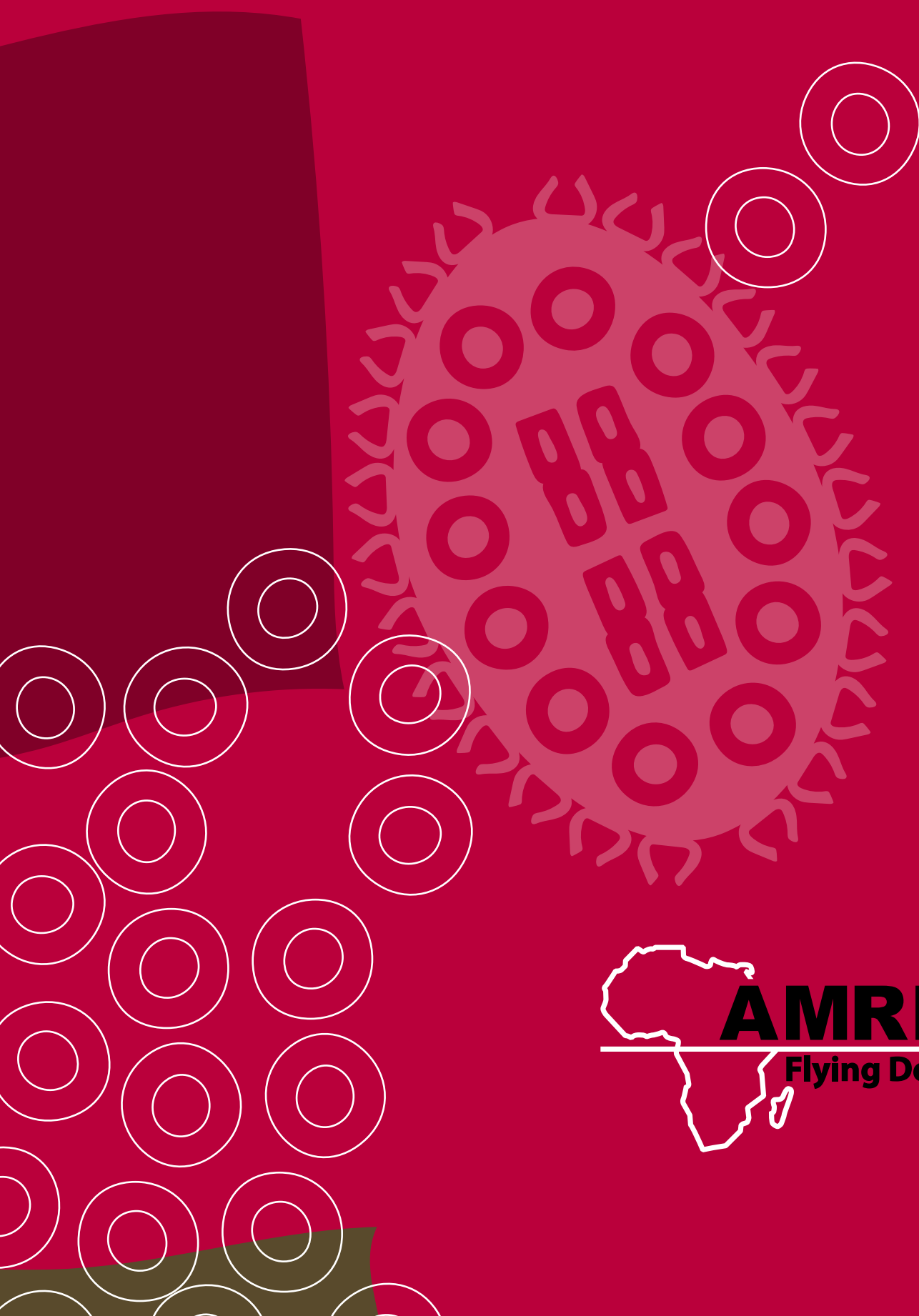


**ANNUAL REPORT
2020**





5Y-FDR

AMREF
Flying Doctors

AIR AMBULANCE SERVICE

5Y-FDP

AMREF
Flying Doctors



CONTENTS

Mission, Vision and Values	2
Chairman's Message	3
CEO's Message	4
Board Members	5
Our Commitment	6
Our Staff	7
New Appointments	9
Upcoming Talent	11
Our Services	13
Medical Assistance	15
Emergency Life Support Skills Training	18
Subscription Product	21
The Isolation Unit	24
Aircraft Available	26
Range Map	28
Medical Evacuation Case Study	30
A Day in the Life of a Chief Pilot	32
A Day in the Life of a Flight Nurse	33
Up Close with Our CEO	34
Charity Medical Evacuation	36
Wing to Wing	38
Partnership - Isuzu, Family Bank & AFD	40
Partnership - AFD & Standard Chartered Bank	41
Rwanda Inaugural Cocktail	42
Golf sponsorship	44
International Conferences	46
Amref Health Africa Highlights	48
Financial Updates	52
Evacuation by Country	54
Contact us	56

AMREF Flying Doctors' Editorial Team:

*Stephen Ombuya, Catherine Ochola, Flavien Esilaba,
Jane Muthoni and Mukami Njue*

OUR VISION

To be the leading aero-medical and health solutions provider.

OUR MISSION

To deliver internationally accredited aeromedical and health assistance services through empowered people, leveraging the latest aviation and medical technology to ensure our patients receive unrivalled care. We complement the work of Africa's largest health development organisation, Amref Health Africa, to achieve lasting health change.

OUR VALUES

INTEGRITY & TRANSPARENCY

We put integrity and transparency at the heart of all we do ensuring ethical and moral standards are upheld at all times. We are open and honest in our business dealings.

PATIENT CARE

We are committed to providing a world-class service, ensuring our patients receive the best possible management, care and compassion.

RESPONSIVENESS

With decades of experience, we are positioned to provide a fast and efficient response, even in difficult and challenging circumstances.

SAFETY

Safety is inherent in all we do. Whether we are in the air or on the ground, the wellbeing of our patients, passengers and staff is our utmost priority.

INNOVATION & CREATIVITY

We support innovation and creativity to ensure that relevant solutions are available to our customers at all times.



Captain Clyde Thomson

The spread of COVID-19 throughout Eastern Africa in 2020 presented AMREF Flying Doctors with one of the greatest challenges it has faced since its inception. The pandemic created a host of operational and business challenges both locally and internationally.

As the only professional, accredited air ambulance service provider in the region, our capacity to move patients from regional and remote areas into Nairobi – the centre of medical excellence in the region – then onward to overseas destinations was initially seriously compromised. The shutdown of the tourism industry, and the restrictions imposed on international, regional then local travel, meant we could not render most of our air ambulance and related services. This challenged our viability and indeed our very existence.

Thankfully, the prompt decision by the AMREF Flying Doctors Board and senior management to develop our capacity to safely transport COVID-19 cases ensured the organisation remained viable in an extremely challenging environment.

In conjunction with CEO Stephen Gitau, the AMREF Flying Doctors Board developed a strategy to continue operations by partnering initially with the government of Kenya, supporting it logistically for the movement of essential medical personnel and delicate medical equipment to remote areas. This strengthened our relationship with the government and helped open avenues for obtaining crucial support and clearances to continue in-country, regional and international flights.

The highly infectious nature of COVID-19 demanded strict measures to ensure our medical, aircraft operations and ground crew were able to handle patients in a safe environment. We received valuable assistance and advice from James Sherriff, GM Health Service Delivery at the Royal Flying Doctor

Service in Australia (Western Ops), on the appropriate personal protection equipment (PPE) for crew and patients. As a result, we invested in three portable patient transport chambers which enabled us to confidently undertake COVID-safe operations.

With strict PPE protocols in place, AMREF Flying Doctors became the first air ambulance service provider in East and Central Africa, as well the first emergency response organisation, to be able to safely transport



COVID-19 patients.

Additionally, we enforced a strict work from home rule for non-essential staff and later introduced a rotational reporting system for all staff. This worked well in supporting our 24/7 emergency operations with minimal infection exposure for staff.

In 2020 we undertook a total of 623 patient transfers, of which 12 per cent were confirmed COVID-19 patients. Thanks to the professionalism of our staff in adhering to the

PPE protocols, none of our operational crew contracted COVID-19.

Under the leadership of our CEO Stephen Gitau and Medical Director Dr Joseph Lelo we also secured contracts to train government agency staff to prepare for the resumption of operations at the eight international airports in East Africa, further contributing to the viability of AMREF Flying Doctors.

The additional workload in 2020 prompted a review of aircraft operations, and I'd like

to thank CEO Stephen Gitau and COO Mike Black for their valuable work in this area. Following the review, the Board endorsed the disposal of our Beechcraft B200 King Air turboprop aircraft and the purchase of a Cessna Sovereign jet, which is more suited to the current operating requirements and will further broaden the operating profile of the organisation's fleet to meet current and future demands.

During the year, Board Chair John Stone and Board member Dr Terry Martin resigned from the Board for personal reasons and I would like to thank them both for their valuable advice and outstanding contribution to the work of the organisation.

I would like to acknowledge and thank Board member Ms Jane Mbatia for her wisdom and guidance during a period of several months as acting Chair prior to my election as chair.

During the year Mr Frank Ireri was appointed to the Board and with a background in banking, he brings a wide range of financial expertise to the organisation.

I thank all members of the Board for their dedication and wisdom during an exceptionally challenging year. However, the unwavering commitment of Board members, the dynamic leadership of our CEO and his management team, and the outstanding professionalism of our hard-working staff have all contributed to the operational and financial success of our organisation in 2020.

I look forward to AMREF Flying Doctors continuing its success in 2021.

Stephen Gitau

**Chief Executive Officer,
AMREF Flying Doctors**



As witnessed by many organisations around the world the year 2020 was one to remember. The year got off to a great start for the AMREF Flying Doctors team, which was doing a commendable job to make strategic transformations, taking decisive steps to grow our organisation. All lines of business performed well in quarter one, with positive expectations of growth for the remainder of the year. The Senior Leadership Team held its first strategic meeting in February to discuss and finalise the five-year company strategy and the applicable action steps to deliver on the same. A key activity held in this period, which was also part of our strategy to have a stronger regional presence, was our very successful launch event in Kigali, Rwanda in early March. The event was attended by key representatives from different areas of the Rwanda market, including the government, insurance and finance sectors. The next planned events were to be held in Burundi, Tanzania and Uganda.

In mid-March, when the first COVID-19 case was reported in Kenya, we were presented with a slew of operational and business challenges, both locally and internationally. Our ability to transport patients to and from regional and international destinations of medical excellence was initially severely hampered. We were unable to provide most of our air ambulance and related services due to restrictions imposed on international, regional, and local travel.

Considering the nature of our business, we needed – and decided – to put together a mitigation strategy. We were privileged to have the support of Amref Health Africa and worked closely with them, which allowed us to partner with the government of Kenya. Initially, this was to assist it logistically with the movement of medical personnel and delicate medical equipment to remote areas, as part of its COVID-19 response efforts. This strengthened our relationship with the government and further helped open avenues for obtaining crucial support and clearances to continue in-country, regional and even

international flights.

With the increasing possibility of the need to transfer COVID-19 patients by air ambulance between medical facilities in the region and beyond, we had to take very strict measures to ensure our medical, air and ground crew were able to handle patients in a safe environment. With support from organisations such as the ISTAT Foundation, we made the decision to purchase three portable patient transport isolation chambers, as well as other medical equipment such as PPE. All AMREF Flying Doctors air, medical, and ground personnel

“...the first air ambulance service provider in East and Central Africa... to make such an investment”

received comprehensive training in preparation for immediate deployment. This set the pace because we were the first air ambulance service provider in East and Central Africa, as well as the first emergency response organisation, to make such an investment. We successfully transported more than 20 COVID-19-related cases in the first six weeks of using the isolation chambers. Furthermore, to mitigate the restrictions on commercial flights and the related logistical complications, we opted to exploit more wing-to-wing partnerships. This significantly helped to ensure continuity of regional and transcontinental patient transfers into and out of Africa.

Additionally, we enforced a strict working from home rule for non-essential staff and later introduced a rotational reporting system for all staff members. This has worked exceptionally well in supporting our 24/7 emergency operations, with minimal exposure

to COVID-19 infection for staff. Having the ability to continue flying through the pandemic as an essential service meant that we were able to support our regional membership base for emergency evacuation to Nairobi, including for COVID-19-related medical emergencies. This, coupled with a strong digital communication campaign, as well as a remote selling strategy under our Commercial department, saw an increase in subscription to our flagship product, Maisha. Unfortunately our tourism product

Scheme B and our partners in the tourism industry were heavily negatively affected by the effects of the pandemic in terms of travel restrictions. This led to a significant decrease in product revenue for AMREF Flying Doctors in this regard.

Our training services were also severely impacted, especially the Basic Life Support (BLS) and Advanced Cardiovascular Life Support (ACLS) courses. However, our Training department, with the support of management, was able to secure a contract with the East African Community (EAC) Secretariat to conduct COVID preparedness training, funded by the German Government via the Deutsche Gesellschaft für Internationale Zusammenarbeit (GIZ) GmbH. We managed to provide comprehensive Training of Trainers (ToT) in two phases: one for nine One Stop Border Posts (OSBPs) and the other for eight East African International Airports. The training aimed to have the trained spearhead the development and delivery of targeted training sessions for the rest of their personnel, as part of a campaign to halt the spread of COVID-19 in the region.

Finally, I would like to express my gratitude to our key stakeholders and partners who supported us throughout 2020, including the Government of Kenya (Ministry of Health, Foreign Affairs and Interior Security), local and regional hospitals, industry partners (Kenya Airports Authority, KCAA), Amref Health Africa, the Board and the Management, with whom we worked closely and tirelessly to ensure our patients received the highest standard of care. I would like to thank all AMREF Flying Doctors' staff for outstanding performances in 2020. We are grateful that we were able to support and be of value to the region during the pandemic period!

BOARD MEMBERS



AMREF Flying Doctors is committed to excellence, not only in the service we provide to our partners and clients, but to the medical community at large. The board provides governance and fiduciary oversight, sets policy, and assesses AMREF Flying Doctors' overall performance. We are extremely grateful for their dedication and contribution to our work.



Capt. Clyde Thomson



Jane Mbatia



Dr. Githinji Gitahi



Kellen Kariuki



Jonathan Dutton



Major Gen (Rtd) Charles M Mwanzia

“The number one priority for businesses, particularly in the midst of a pandemic, should be to prioritize their staff and consumers. When it comes to employee care, the objectives should be to ‘keep them well, employed, and mentally healthy’.”

Capt. Clyde Thomson



Frank Ileri



Hon. Raychelle Omamo

BOARD MEMBERS



We go the extra mile



Complex medical problems, logistical constraints, and the unusual environment of Africa all pose regular challenges for our staff. We work together to leverage collective skills and expertise to resolve issues and find solutions in the fastest possible way.

Maintain first-class innovation



We operate in a fast-paced and constantly changing environment. Our continued investment in state-of-the-art equipment and staff training keeps us at the forefront of medical care and ensures that our patients receive the best possible care.

Clear communication

We track our aircraft in-flight and maintain regular communication with relevant stakeholders, ensuring that everyone is kept as informed as possible to alleviate unnecessary anxiety.



Sharing our Heritage

The Visitors' Centre at Wilson Airport commemorates AMREF Flying Doctors' 60-year-plus history. The Centre is open to anyone interested in learning about our rich heritage and the remarkable efforts of our founding fathers.

We go where no one else goes

No matter where they are, we put our patients at the center of all our missions. The challenging geography of Africa, regional conflict, cross-border operations, and bureaucracy require real resourcefulness and determination on behalf of the staff in order to reach those in need.



We partner with others

To provide the best and most timely service to those in need, we collaborate with Kenyan county governments, regional hospitals, community and other international partners.



Caring for the Uncared

Our charity flight program evacuates patients from the most remote areas of Kenya to medical facilities for treatment.





OUR TEAM



AMREF Flying Doctors' staff are renowned for their expert training and high-level qualifications.

With commitment and professionalism, our staff work tirelessly to maintain our reputation as Africa's leading air ambulance provider.



Pleasure in our job puts perfection in our work

AMREF Flying Doctors' staff are renowned for their expert training and high level of qualification. With commitment and professionalism, our staff works tirelessly to maintain our reputation as Eastern Africa's leading air ambulance provider.

Medical Team

This unit is comprised of doctors and flight nurses who are exceptionally well qualified and trained to understand and respond to different emergencies and primary healthcare situations that may arise while on-board an air or ground ambulance. This specialist knowledge enables our medics to attend to all of a patient's urgent needs during medical evacuations, even in the most extreme cases.

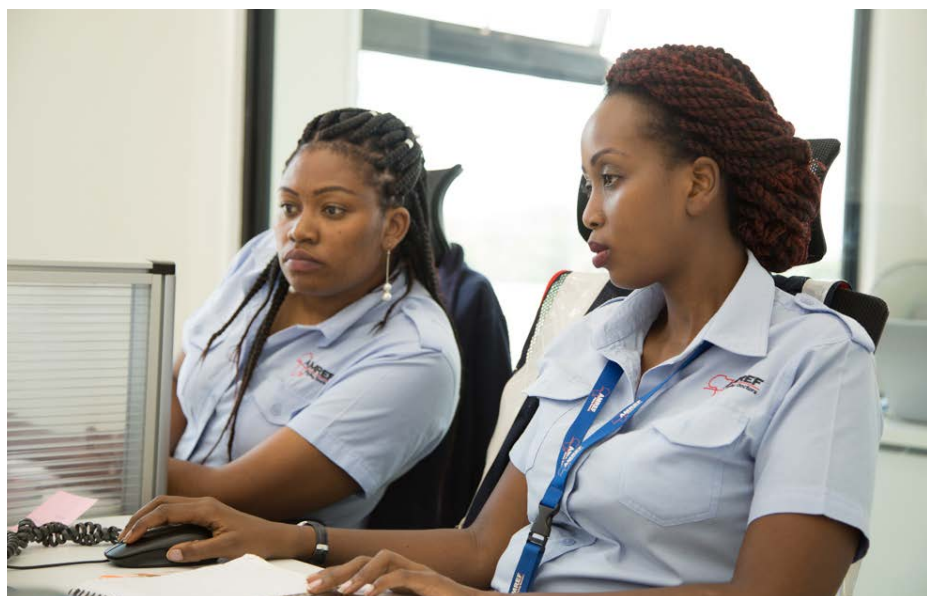
Aviation Team

Our Aviation team is made up of pilots, engineers, and maintenance personnel. The team is professionally qualified and adheres to the highest aviation industry standards, enabling it to assist with emergency rescue and medical transport services. AMREF Flying Doctors' Aviation team is critical in fostering a positive safety culture that ensures the safety of patients, flight crews, and medical professionals on these flights in any environment, including on regional bush airstrips, short and long-haul missions, and international missions – all in line with the highest international standards.

Operations Team

The Operations team consists of flight dispatchers who have a substantial impact on how AMREF Flying Doctors conducts its business. The team is extremely proactive in ensuring that flight safety procedures are

followed during service delivery, through flight planning and dispatch, supervising quotations, landing and take-off times, coordinating with the relevant parties to obtain clearances, and conducting crew departure and arrival briefings.



OUR TEAM



Commercial Team

This unit incorporates the departments of Business Development, Corporate Communications, and Marketing. The Corporate Communications and Marketing departments are responsible for all aspects of communication, design, advertising, research, customer service, public relations, sales, and promotions. Meanwhile, the Business Development department advises the Marketing team based on customer feedback and focuses on direct customer contact to drive sales. The teams collaborate closely to oversee the organisation's branding by developing an overarching image that positively represents AMREF Flying Doctors.



Human Resource & Administrative Team

The Human Resource team contributes to AMREF Flying Doctors' growth by ensuring the employees' life cycle is healthy. The team is responsible for fostering an organisational culture that discourages all forms of toxic behavior that stifles employee growth and openness, as well as organizational performance, by enacting policies that ensure fairness and continuity within the organization. The team manages the company's human capital through its expertise, by creating an attractive work environment geared towards retaining talent and ensuring employees' interest and wellbeing, all within the goal of achieving established business objectives.

Information Technology Team

The IT team is responsible for providing the infrastructure necessary to ensure AMREF Flying Doctors' overall performance. The team works behind the scenes to equip employees with the tools necessary to connect, collaborate, automate repetitive tasks, and perform their jobs. It contributes to the organisation's success by overseeing the governance of technical systems, as well as the maintenance of the organization's technology infrastructure, overall system functionality, and internal computer software and hardware development.

“The commercial team oversees the organisation’s branding by developing an overarching image that positively represents AMREF Flying Doctors.”

Finance Team

The Finance team is a critical pillar of AMREF Flying Doctors because our success is heavily reliant on how well our finances are managed. The team ensures effective financial control and management by acquiring funds for the company, managing funds, and planning expenditure on various assets. This team aligns daily financial decisions with short, medium, and long-term objectives, which are always in sync with a broader vision that expresses why the company was founded and how we measure success.



New Appointments

AMREF Flying Doctors is constantly on the lookout for individuals who are talented, focused, self-driven, professional, and hardworking to join our team.

Medical Crew



Jane Omusula
Medical Crew

"I've never met a team more passionate and dedicated to helping others than AMREF Flying Doctors. It's an experience that I look forward to on a daily basis now."

Jane Omusula Aluoch

Aviation Staff



Capt. Kefa Kihara
Air Ambulance Pilot

"As a pilot with AMREF Flying Doctors, my goal is to inspire others by providing them with a reason to persevere even during difficult times. That is why I fly for AMREF Flying Doctors on a daily basis."

Capt. Kefa Kihara



Capt. Millicent Chahonya
Air Ambulance Pilot

"I've had numerous new experiences during my time at AMREF Flying Doctors, and I've embraced change and grown in a nurturing and supportive environment. I'd like to believe that what we do makes a difference. It's extremely satisfying to learn that someone you airlifted is doing well."

Capt. Millicent Chahonya

Finance

"Working for AMREF Flying Doctors for the past year has been a great pleasure and has provided me with a great deal of satisfaction. I must say that waking up every morning to give my all to the noble mission of saving lives, as well as the larger Amref's mission of bringing lasting change to Africa, is a cause worth living for."

Joe Muturi
Chief Finance Officer



Joe Muturi
Chief Finance Officer

"Every day I wake up inspired by the knowledge that my actions or inactions have a direct impact on how AMREF Flying Doctors provides excellent lifesaving services to humanity. As a result, I strive to go above and beyond the call of duty by always giving my best wherever and whenever possible."

Julius Aminga
Management Accountant



Julius Aminga
Management Accountant

Business Development



Jame Nzau
Bus. Dev. Executive

"AMREF Flying Doctors is a one-of-a-kind organisation whose primary goal is to save lives. It is the best place to work."

James Nzau
Business Development Executive

"Working as a sales executive for AMREF Flying Doctors has taught me the value of teamwork and integrity on a broad scale."

Raymond Makarara
Business Development Executive



Raymond Makarara
Bus. Dev. Executive



Daniel Mrema
Bus. Dev. Executive

"Working at AMREF Flying Doctors is a dream come true; it is an exciting story that must be told. I'm constantly excited to be a part of the team that is driving the organisation's growth by promoting the product offerings."

Daniel Mrema
Business Development Executive

Upcoming Talent



Bethuel Ongeti

"It's an incredible experience to be a part of the AMREF Flying Doctors team – a fast-paced environment that allows me to grow professionally. Thanks to the organisation, I've learned to be adaptable and have a good outlook. I am grateful for the opportunity to be a part of such an incredible team."

Bethuel Ongeti
Business Development Intern

"Working for AMREF Flying Doctors has been a fantastic experience for me. Working in a diverse environment and interacting with people from various backgrounds has broadened my networking, which is beneficial. It's been a fantastic journey so far, and I'm looking forward to learning and growing more from all of the opportunities that have been presented to me."

Irine Njeri
Business Development Intern



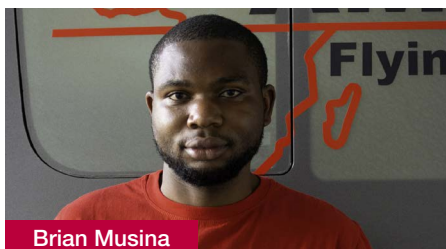
Irine Njeri



Grace Muthoni

"Working for AMREF Flying Doctors has been the most life-changing experience I've ever had! A mission-driven organisation committed to providing world-class services to its staff and clients. I've gained more knowledge than I anticipated and have had the opportunity to network with like-minded individuals to hone my sales skills and expertise. I am grateful to my seniors and the entire organisation for this incredible opportunity to serve wholeheartedly."

Grace Muthoni
Business Development Intern



Brian Musina

"AMREF Flying Doctors is a great place to work as it promotes the power of team work."

Brian Musina
Business Development Intern

"Working for AMREF Flying Doctors has been the best job I've ever had, having excellent teams that enable efficient workflow, as well as excellent accountable leadership and a pleasant working environment. Working here has also given me the opportunity to strengthen my communication skills. Overall, I've discovered that happier employees result in more/ increased productivity."

Mario Teresa
Business Development Intern



Mario Teresa



A TRUSTED BRAND

When in need of regional or international medical evacuation services, you can count on AMREF Flying Doctors to provide reliable, specialised patient transfers.

AMREF Flying Doctors provides fully equipped air ambulances, with experienced medical personnel onboard, to ensure optimal care of patients.

OVER

1000

PATIENT TRANSFERS
ANNUALLY

OVER

300

COVID-19 PATIENT
TRANSFERS SINCE MAY 2020

FOR INQUIRIES CONTACT

+254 20 699 2000

info@flydoc.org

www.flydoc.org

Here, whenever you need us!

Over the years, AMREF Flying Doctors has offered various services. We are fully equipped to provide services tailored to your needs, including:

1. Medical Services

■ Air Ambulance

Using a fleet of short – and long-range turboprop and jet aircraft, AMREF Flying Doctors provides air ambulance services from Africa to the rest of the world. Our air ambulance services are accessible through:

- Subscription products – Maisha (annual & short-term) and Tourist Scheme B (designed for tour operators) air and ground ambulance plans covering Eastern Africa.
- Service Provider Agreement (SPA) directly with the company – covers beyond Maisha coverage areas and only applicable to organisations
- Client's insurance cover
- Direct payment

■ Ground Ambulance

Our ground ambulances, fitted with integrated patient transport stretcher systems and the latest medical equipment, ensure an efficient ground transport service and world-class patient care. These ambulances are always available on request for medical transfer services.

■ Medical Standby

We strive to keep the communities we serve as safe as possible. Often, that means taking proactive steps in anticipating the need for our services at significant events. AMREF Flying Doctors provides medical standby services using a ground ambulance, helicopter and/ or fixed-wing aircraft. We partner with major events to provide any necessary medical care. Some of these events include school activities, polo games, horse shows and national events such as the Lewa Safari Marathon and Rhino Charge.



2. Medical Assistance Services

Our assistance services incorporate a portfolio of medical, technical and logistical support services catering for the international insurance and assistance market's needs on behalf of their members. These services include:

- Guarantees of payment for medical bills and related costs
- Retrieval of medical reports for in and out-patients
- Hotel and flight ticket bookings for patients and accompanying passengers where applicable
- Arrangement of ground transfers to and from hospitals and airports
- Cost control and verification of patient claims
- Cash advance (with prior arrangement) and assistance with lost baggage or documents
- Funeral assistance and repatriation of mortal remains
- Medicine dispatch



4. Training

Emergency Life Support Skills training is available through AMREF Flying Doctors, and is provided by highly specialised medical personnel. The training courses include:

- First Aid course including:
 - Health talks
 - Refresher courses
 - Tailor-made courses
- Heart Saver First Aid
- Basic Life Support (BLS)
- Basic Trauma Life Support (BTLS)
- Advanced Cardiovascular Life Support (ACLS)
- Wilderness First Responder
- COVID-19 Preparedness for Places of Work

3. Commercial Medical Escorts

AMREF Flying Doctors provides world-class medical escort services on commercial flights that are more appropriate for non-critical patients. We make all the necessary arrangements to ensure our clients' transportation is worry-free.



AMREF Flying Doctors' **MEDICAL ASSISTANCE SERVICES** **OUR KNOW HOW AT YOUR SERVICE**



A strong network in the Eastern Africa region

With its base located in the main hub of East Africa – Nairobi, Kenya - AMREF Flying Doctors has built a solid network of partners in the medical and health transport fields in the region, allowing our local clients swift access to assistance services.



24/7 Services

AMREF Flying Doctors operates a 24-hour Operations and Emergency Control Centre manned by professional medical and operational staff on standby to offer the required assistance when needed.



Professionally Trained Staff


AMREF Flying Doctors' assistance desk is managed by experienced medical coordinators who are well positioned to provide a fast and efficient response to even the most challenging assistance requests in the region.



Serving International Insurance & Assistance Companies

With many years of experience in serving a growing portfolio of 100+ international insurance and assistance companies, AMREF Flying Doctors has the ability and know-how to deliver top-quality services for this industry.

FOR INQUIRIES CONTACT

 **+254 20 699 2000**

 **info@flydoc.org**

www.flydoc.org

Medical Assistance Services in 2020

In the first quarter of 2020, the assistance services industry had an incredible start. However, COVID-19 spread throughout the world, resulting in a global lockdown. The economy entered a deep freeze, which proved a massive blow to our company. The lockdown wreaked havoc on the tourism market and the expatriate community – two of our industry's most important pillars. The majority of travellers returned to their home countries, leaving our industry with a target audience deficit. By April, the number of clients served had dropped by roughly 75 per cent.

We quickly adapted to the 'new normal' – by devising new strategies to regain

our footing. We began offering logistical solutions for COVID-19 testing to both domestic and international partners. Simultaneously, we kept them informed of our capabilities in terms of COVID-19 patient medical evacuation, home care services, and the various assistance services we could provide despite the constraints. We also virtually engaged our clients and partners to keep conversations going.

It is hoped that with the development and rollout of the Sars-Cov-2 vaccine, there will be increased travel and an adjustment to the new normal, where we will be able to continue to provide the global assistance industry with the services it requires.

“We virtually engaged our clients and partners to keep the conversations going...”

“We quickly adapted to the new normal by devising new strategies to regain our footing.”





EMERGENCY LIFE SUPPORT SKILLS TRAINING

COURSES OFFERED


1. First Aid course, including:
 - Health talks
 - Refresher courses
 - Tailor-made courses
2. COVID-19 Preparedness
3. Heart Saver First Aid
4. Basic Life Support (BLS)
5. Wilderness First Responder
6. Basic Trauma Life Support (BTLS)
7. Advanced Cardiovascular Life Support (ACLS)



International Training Centre

*AMREF Flying Doctors is an accredited
American Heart Association training centre.*

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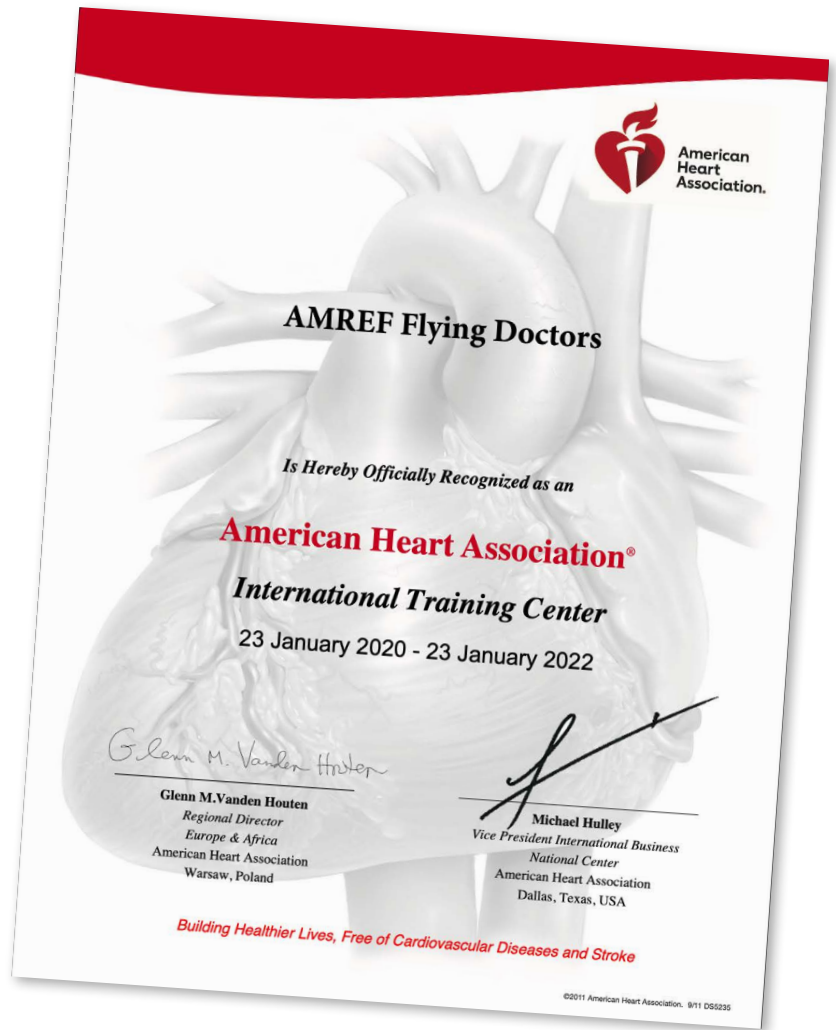
American Heart Association Certification

AMREF Flying Doctors designated an AHA Training Centre

After more than 11 years of providing life support training, AMREF Flying Doctors has signed an agreement with the American Heart Association (AHA) to become an official AHA Training Centre. As a result of this partnership, AMREF Flying Doctors is now able to provide a higher level of service to its customers, instructors, and the general public. This also means that we have an infinite number of opportunities to expand our Training department and modify our population's emergency response. The AHA considers a number of factors when deciding where to locate its Training Centres, looking at a company's history, current and future growth, stability, and operations. The fact that AMREF Flying Doctors was chosen after such a rigorous process demonstrates our commitment over the years.

"We are delighted to partner with the American Heart Association to help build a healthier society by equipping individuals and groups with knowledge about cardiovascular disease, the world's greatest killer. As an AHA International Training Centre and Preferred Training Partner, we intend to use our experience in healthcare simulation to conduct AHA-accredited courses throughout Africa."

Anthony Kihara - Training Coordinator



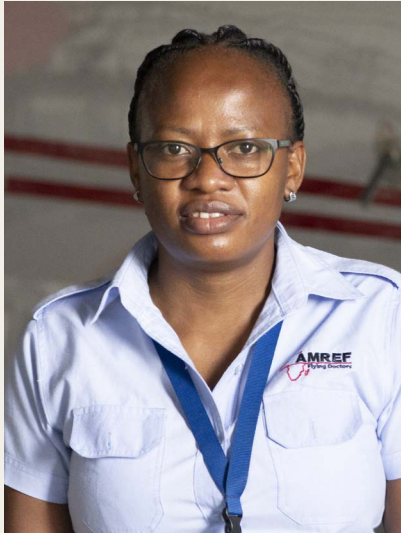
My STORY

IRENE OJOW

Continuing Airworthiness Officer

Aviation is a male-dominated industry that requires self-assurance, perseverance, and willingness to prove one's worth. AMREF Flying Doctors provided me with the ability to not only expand the business but also shape my career by overcoming the odds regarding my proficiency as a female Aircraft Technician. As a Continuing Airworthiness Officer, I'm responsible for field assistance, aircraft maintenance, planning, and record keeping. In the air ambulance industry, it is critical to schedule continuous aircraft inspections

to ensure greater aircraft availability while maintaining the airworthiness qualities desired during flights, particularly in the wake of the COVID-19 pandemic, when patient transfers are high. AMREF Flying Doctors, operating 24/7, offers enough infrastructure and around-the-clock support to allow us to function effectively even in the midst of a pandemic. This has given me pride in my daily accomplishments, allowing me to realise that I have saved lives in my own unique way.





COVID-19 PREPAREDNESS TRAINING

AMREF Flying Doctors remains at the forefront of providing Emergency Life Support skills, but COVID-19 impacted numerous business operations.

However, the East African Community (EAC) Secretariat partnered with us after the World Health Organization (WHO) recognised the importance of training African countries to protect their citizens while the



disease was still in its infancy in Africa. This collaboration with the EAC's Civil Aviation Safety and Security Oversight Agency (CASSOA) Secretariat, facilitated by the German government's Deutsche Gesellschaft für Internationale Zusammenarbeit (GIZ) GmbH, ensured that airport stakeholders with direct contact with passengers and/or

their luggage received adequate training. This included airport medical providers, aircraft/airline operators, security, immigration, customs, cargo and baggage handlers. We took the initiative to participate in COVID-19 preparedness training not only for the benefit of our own country, Kenya, but also for the benefit of Africa as a whole. This

OUR SERVICES

was also part of our commitment to our vision of becoming the world's leading provider of aeromedical and health solutions.

Being based in Africa gives us a first-hand understanding of how third-world countries are characterized by underdeveloped health systems and infrastructure, a high prevalence of comorbidities that weaken immune systems, and high levels of poverty associated with population ill health and limited access to quality healthcare. This fuels our desire to be a part of the team that supports and assists in the coordination of healthcare.

We used this opportunity to conduct a comprehensive Training of Trainers (ToT) program in two phases:

The eight international Airports include; Jomo Kenyatta International Airport, Dar es Salaam, Mombasa, Entebbe, Juba, Bujumbura , Kigali, and Abeid Amani Karume International Airport in Zanzibar

The nine One Stop Border Posts; Burundi-Rwanda (Nemba/Gasenyi), Burundi-Tanzania (Kobero/Kabanga), Kenya-Tanzania

The program enhanced the capacity of staff and surveillance regimes to be aware of and prepared for COVID-19

(Isebania/Sirari and Lunga Lunga/Hororo), Kenya-Uganda (Malaba and Busia), Kenya-Tanzania (Namanga), Rwanda-Uganda (Gatuna/Katuna and Kagitumba/Mirama Hills), South Sudan-Uganda (Nimule/Elegu), Tanzania-Rwanda (Rusumo) and Tanzania-Uganda (Mutukula).

The program aimed to leverage and improve pre-existing frameworks and resources in order to develop more robust emergency management systems and procedures while also fostering airport collaboration.

The mission of the EAC CASSOA to develop, promote, and coordinate the implementation of sustainable civil aviation safety and security oversight systems in Partner States facilitated the provision of these skills.

The program enhanced the capacity of staff and surveillance regimes regarding their awareness of – and prepared for – COVID-19, as well as their participation in the campaign to contain the virus' spread in the EA region.



OVER
600
TOT TRAINED

9 ONE STOP BORDER POSTS(OSBP)

8 E.A INTERNATIONAL AIRPORTS



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Subscription Products



AMREF Flying Doctors offers two different subscription plans: The Maisha Air and Ground ambulance plan, which targets individuals, groups and corporate subscribers: and Scheme B, which is aimed at tour and safari operators, hotels, and lounges to provide their clients with access to our air and ground ambulance services in the event of a medical emergency while in East Africa. Both are available in different levels depending on the region of coverage. Since the launch of these products over a decade ago, both have experienced consistent subscription revenue growth and have emerged as the leading subscription products offering direct access to professional medical evacuation services.

Moreover, the availability of these products in the regional market has improved the local perception of air ambulance services, which were previously perceived as being prohibitively expensive and thus inaccessible to some market segments. This has been accomplished through marketing initiatives that have created awareness and visibility in covered countries, partnering with regional organisations, and leveraging the Amref Health Africa ecosystem.

In 2020, the spread of COVID-19 into Eastern Africa posed a slew of operational and business challenges for AMREF Flying Doctors, affecting our subscription products. Border restrictions and economic constraints took a toll on the tourism industry, resulting in an 80 per cent decline in Maisha subscriptions.

COVID-19's impact on Maisha subscription revenue was also felt.

Due to our inability to provide the majority of our air ambulance and

related services, we chose to collaborate closely with our mother organisation, Amref Health Africa, and also realised the value in partnering with the government of Kenya. As part of the government's COVID-19 response efforts, we assisted in logistically transporting medical personnel and delicate medical equipment to remote areas. This bolstered our relationship with the government and paved the way for us to continue operating in-country, regionally, and even internationally. Furthermore, we were able to position our

“The availability of Maisha in the regional market has improved the local perception of Air Ambulance services which were previously perceived as being expensive”

products to meet COVID-19 patients' transfer needs. Through continued engagement with clients and customers, the market became aware of our capabilities and efforts in health-related matters, resulting in a 24 per cent increase in revenue from Maisha Annual cover, with strong subscription from South Sudan and Burundi. Part of the portfolio's growth can be attributed to Management's decision to maintain the subscription product price despite the economic crisis. Additionally, we have been able to increase awareness and exposure for our products and services through partnerships with internationally recognised brands such as Standard Chartered Bank, Family Bank, and Isuzu.

However, our subscription portfolio experienced an 80 per cent revenue loss on our tourist product Scheme B. This is primarily due to the substantially negative impact on the travel insurance market of travel restrictions imposed in response to the COVID-19 pandemic.

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OVER
1000
EVAC MISSIONS



OVER

300

COVID-19 TRANSFERS



OVER

200

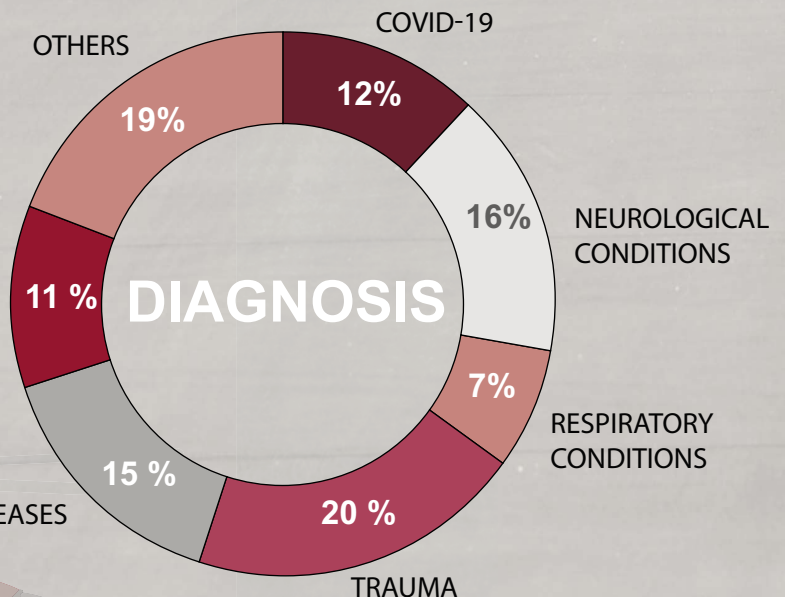
GROUND TRANSFERS



OVER

700

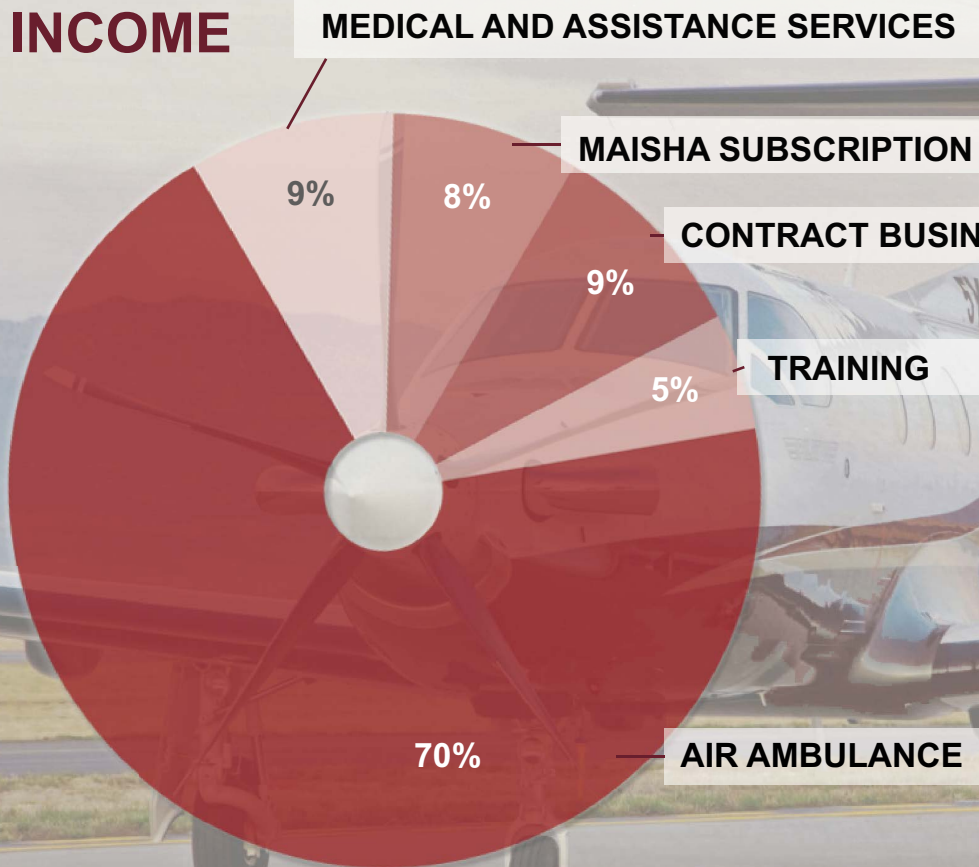
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500+  **24/7**
MEDICAL HELPLINE CALLS
EVERY MONTH

OVER 
60 **YEARS**
IN THE AEROMEDICAL INDUSTRY

INCOME



Our New Portable Isolation Chambers

The IsoArk N36 is an innovative portable medical isolation and transportation system designed for optimal safety and numerous treatment options during patient loading and transport.



OUR INVESTMENT

The unit is a single patient isolator made of cleanable materials. It is easily assembled for use, is fully transportable and compatible with leading ambulance stretcher systems as well as most mechanical ventilator circuits. The equipment meets all requirements for full environmental protection from cross-contamination.

Easy access to the patient enables advanced care and treatment without any compromise. The equipment is intended for use in both high risk scenarios and in every day practice dealing with high risk infections. The design allows for full intensive care treatment and emergency procedures. The unit is further designed for safe transportation, multiple uses, optimal patient comfort and compact storage when not in use.



“The procurement of the isolation chambers enabled us to transport patients with COVID-19 infection initially in the East and Central Africa region and later to other parts of the world”



initially in the East and Central Africa region and later to other parts of the world subject to the pandemic – related restrictions applicable at the time. By December 2020 we had transferred over 300 COVID-19 related cases having added a third isolation chamber. The use of the chambers and the COVID-related protocol ensured that our medical team could work with great confidence, knowing that the risk of infection was minimal.

OVER
300
COVID-19 PATIENT
TRANSFERS SINCE MAY 2020

Only 30 minutes is needed to prepare and load the patient into the portable isolation chamber. The patient can stay inside for as long as necessary as the air around them is circulated through special filters – meaning that both short and long-distance transfers are possible.

Shortly after the pandemic arrived in Kenya, AMREF Flying Doctors procured two isolation chambers that strengthened our medical protocols for the transfer of patients with infectious diseases. This enabled us to transport patients with COVID-19 infection –



AIRCRAFT AVAILABLE



PILATUS PC-12

RANGE (NM): 1,680

SPEED (KNOTS): 225

CAPACITY: 2 STRETCHERS & 1 SITTING

HAS SHORT TAKE-OFF AND LANDING CAPABILITY INTO BUSH AIRSTRIPS IN THE EAST AND CENTRAL AFRICA REGION.



CITATION XLS C560

RANGE (NM): 2,100

SPEED (KNOTS): 400

CAPACITY: 2 STRETCHERS & 1 SITTING

USED FOR LONG HAUL TRANSFER OF CRITICAL PATIENTS WITHIN THE AFRICAN CONTINENT AS WELL AS REPATRIATION TO UK, EUROPE, MIDDLE EAST & ASIA.



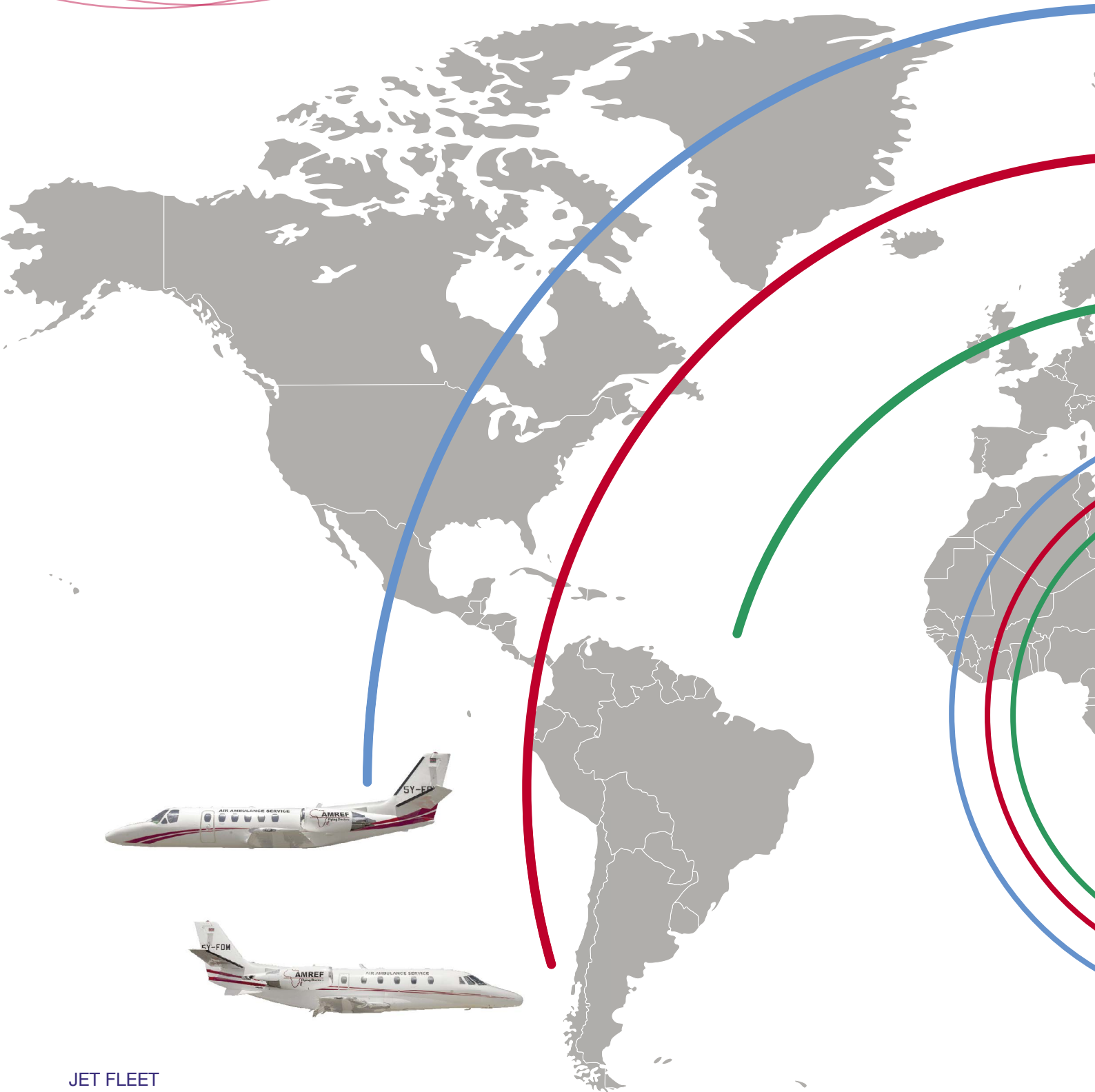
CITATION SOVEREIGN C680

RANGE (NM): 2,500 SPEED (KNOTS): 430 CAPACITY: 2 STRETCHERS & 3 SITTING
USED FOR TRANSFER OF PATIENTS WITHIN CONTINENT AS WELL REPATRIATION ACROSS TO EUROPE, MIDDLE EAST AND INDIA.



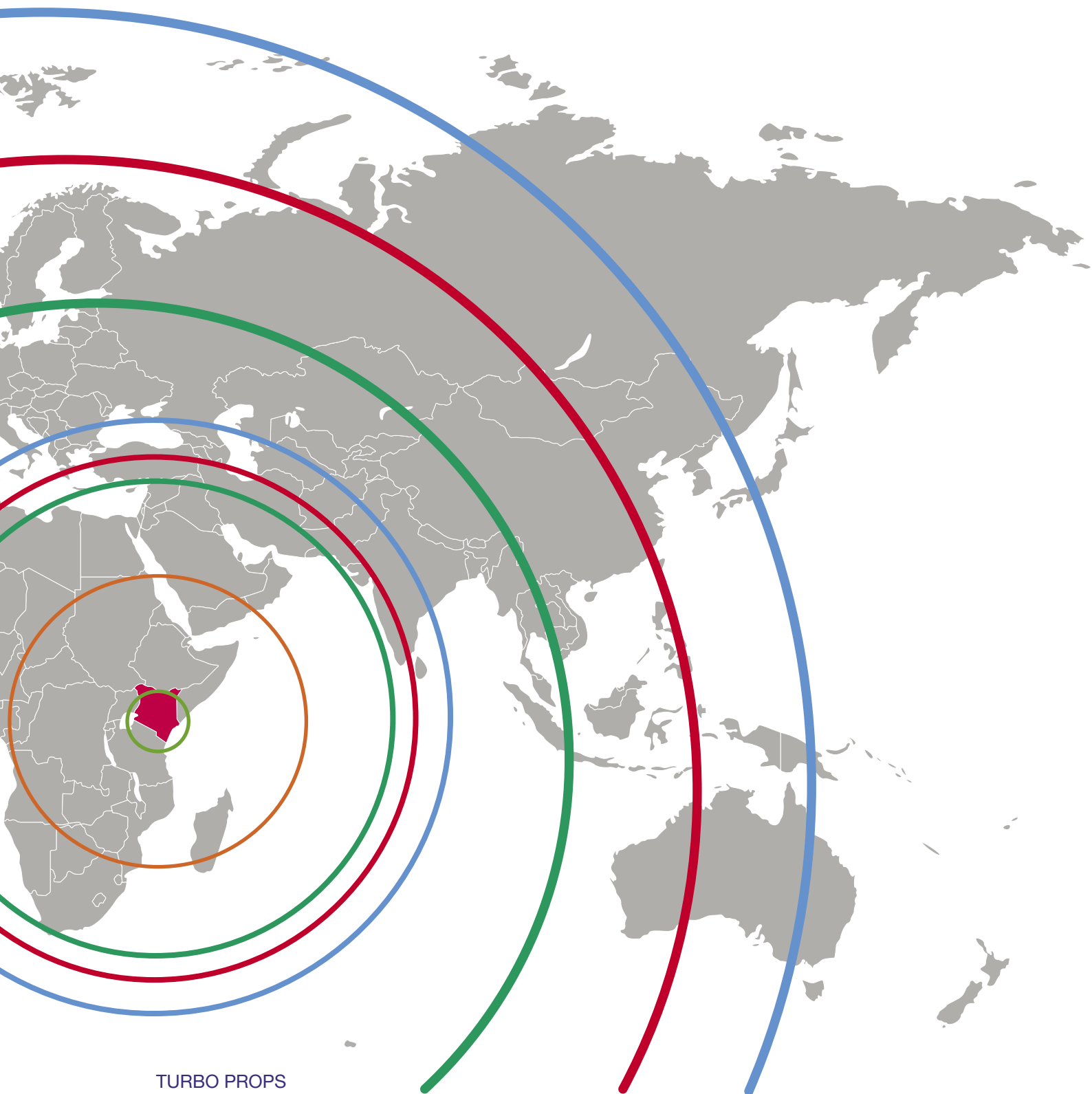
CITATION BRAVO C550

RANGE (NM): 1,800 SPEED (KNOTS): 350 CAPACITY: 1 STRETCHER & 1 SITTING
USED FOR TRANSFER OF PATIENTS WITHIN CONTINENT AS WELL REPATRIATION ACROSS TO EUROPE, MIDDLE EAST AND INDIA.



JET FLEET

AIRCRAFT	RANGE IN NAUTICAL MILES			SPEED (KNOTS)	CAP
	NO TECH STOP	1 TECH STOP	2 TECH STOPS		
Citation Bravo C550 (Owned)	1,800 nm	3,500 nm	5,250 nm	350	1 stretcher
Citation XLS C560 (Owned)	2,100 nm	4,200 nm	6,300 nm	400	2 stretchers
Citation Sovereign C680 (Owned)	2,500 nm	5,000 nm	7,500 nm	430	2 stretchers



TURBO PROPS

CAPACITY
1 stretcher & 1 sitting
2 stretchers & 1 sitting
2 stretchers & 3 sitting

AIRCRAFT	RANGE IN NAUTICAL MILES		SPEED (KNOTS)	CAPACITY
	NO TECH STOP	1 TECH STOP		
Eurocopter AS350	320 nm	640 nm	100	1 stretcher
Pilatus PC-12 (Owned)	1,680 nm	3,360 nm	225	2 stretchers & 1 sitting

COVID in Comoros Islands



Dr Joseph Lelo, Medical Director of AMREF Flying Doctors, describes an interesting yet challenging double patient evacuation of a mother and child from Moroni, capital city of the Comoros Islands, to Nairobi, Kenya

During the year AMREF Flying Doctors (AFD) received a unique request from one of our assistance partners: to transfer a female patient and her four-year-old child – both of whom had Covid-19 symptoms – from the Comoros Islands to Nairobi, Kenya, to enable them to receive a higher level of medical care. Although we had acquired transport isolation units necessary for the transfer of COVID-19-positive patients and had already successfully carried out several COVID-related missions, this was the first time that AFD had received a request for evacuation of two COVID-19-positive patients together. The immediate challenge with this mission

was the logistical requirement for two isolation units in the same aircraft, together with the three medical personnel required as per AFD's procedures for the management of COVID-19 transfers. Consideration and planning were, therefore, key, as it was anticipated that the child could be uncooperative about being transferred in an isolator. The aircraft chosen for this mission was the Pilatus PC-12, which has a large cargo door suitable for the easy loading and offloading of patients, which would be especially useful when using the patient isolation unit. However, the prevailing weather on the island at the time of the mission posed an extra challenge, as it meant there were time limitations on when the mission could be carried out. We also had to factor in the time needed on the ground to stabilise the patients, secure them in the isolation units, and load them into the aircraft. The aviation operations team had to review the extra

weight of the medical equipment, isolation units and the number of medical personnel necessary for the mission. Additional medical planning was also carried out in regards to sedation for the child, with various options identified.

Mission planning

With procedures around working remotely, and with rotational rosters in place for AFD staff, a Zoom meeting was held by the team scheduled to carry out the mission. This included the flight crew and the medical team (two critical care nurses, including one who was a paediatrician, and an experienced anesthetic doctor), as well as the medical director, aeromedical coordinator and operations manager. Although the medical report we received showed the principal patient was fairly stable, the medical team had to prepare for a worst-case-scenario outcome for both patients, which took rigorous consultation

with the medical director and aeromedical coordinator. The team ensured that extra oxygen cylinders were carried and safely secured onboard, standard drugs were double-checked in consideration of paediatric dosages for the child, and timelines were reviewed, with alternatives in place in case of operational delays.

The medical flight would take approximately three and a half hours, one way, from the island to Nairobi, with a planned total mission time of 10 hours. In consideration of the changing weather conditions on the island, meticulous planning was imperative to ensure minimum time on the ground with a quick turnaround.

Challenges

The early morning departure from Nairobi took place at the scheduled time; however, the quick turnaround within set operational timelines was still necessary in order for the mission to be successfully carried out in one flight-duty period. Upon landing, the team found that the patients had arrived at the airport and were ready for the pick-up. The flight crew proceeded to refuel the aircraft and plan for the flight back, while the medical team attended to the patients.

Fortunately, the patients were found to be in a stable condition and, after a quick brief, the medical team proceeded to don their PPE and then set up the isolation units. The immediate challenge for the medical team was managing the child, who was quite active, and who became anxious when she saw her mother being put in the isolation unit. Secondly, securing the child in the second isolation unit proved to be difficult, even with sedation, as she kept waking up every so often and trying to get out of the unit while crying for her mother. Moreover, local temperatures on the island were soaring, making it very uncomfortable for both patients in the isolation units.

Nevertheless, after successfully loading both patients onboard the aircraft, and after consultation with the medical director back at base, the medical team decided to remove the child from the isolation unit, instead securing him on a chair with a mask, close to his mother. The consideration for this was that it was going to be risky to have a deeply sedated child in an isolation unit. As a result of this consideration, the medical team had to remain in full protective gear for the duration of the flight.


Having been on the ground for longer than the two hours planned, the team managed to take off just before the weather closed in on the island. Furthermore, a couple of hours into the flight, the child finally managed to calm down and sleep comfortably until the aircraft arrived in Nairobi.

Time for reflection

This mission presented an excellent learning opportunity for the team regarding the transportation of two Covid-19 patients with two isolation units onboard a single

and time restrictions for such a mission. A quick turnaround, if required, can present a serious challenge for the medical team in terms of stabilising the patients, securing them in the isolation units, as well as loading and securing the units in the aircraft before departure. A conservative approach towards planning flights for COVID-19 patients thus continues to be the norm rather than the exception.

The transport of sedated children in isolation units will continue to pose a challenge, owing to the risks involved: the primary risk being



“local temperatures on the island were soaring, making it very uncomfortable for both patients in the isolation units”

aircraft. Operationally, the mission proved that through the use of a Pilatus PC-12, with its large cargo door, AFD can successfully transport two COVID-19-positive patients in this way. Configuring the aircraft with a double stretcher system has once again proved to offer great versatility in the varied and challenging environments in which AFD operates.

Depending on the flight routing, distance, pick-up and destination locations, meticulous operational planning is required to take into account the weight implications

to the patient in case of sedation leading to the need for airway intervention while inside the isolator, and the secondary risk of infection to the medical team should an emergency intervention be required that would necessitate breaching the isolation unit in order to access the patient's airway.

Adequate planning and senior medical consultation is the cornerstone of safe medical evacuations, especially in these turbulent times during the COVID-19 outbreak. Considerations for safety for all involved must always take priority.

...an Air Ambulance Chief Pilot



Captain Kanuri Murigu

No day is ever the same working as an air ambulance pilot. AMREF's operations are fundamentally different from those of a typical airline or air charter company in that we have no prior notice of where we may fly, who may fly, or even the airfield or patient condition at our pick-up locations.

Leading a team of pilots, flight operations officers, and ground crew in one of the busiest air ambulance operators in this region demands a high level of commitment, self-discipline, application of diverse knowledge, and leadership skills in order to achieve our objectives on a consistent basis.

As an air ambulance operator responsible for patient transfers during medical emergencies and emergency medical air logistics, I am responsible for overseeing daily aviation operations, participating in strategic planning, and executing the AMREF Flying Doctors' mission and vision. I am able to meet the physical and mental requirements of my job due to my extensive aviation training and management mentoring, by staying current on emerging trends and, most importantly, through having a good work-life balance.

The COVID-19 pandemic posed significant challenges to our aeromedical operations, through airspace closures, flight restrictions, safety concerns, and logistical planning nightmares. Nonetheless, working with the team and leveraging strong partnerships with the Government of Kenya and other stakeholders paved the way for us to fly again so that we could provide critical emergency care to patients worldwide.

To be candid, it was not easy at first. With the fear, uncertainty, confusion, and psychological stress brought about by the pandemic, I found myself addressing broader issues, including technical ones. As COVID-19 is a highly transmissible disease, I was tasked with developing, practicing, and improving procedures to enable the safe air and ground transport of patients who had contracted the disease. Such procedures, while aimed at reducing the possibility of contamination in the aircraft, had to avoid interfering with flight safety, which can be a delicate balance at times.

As the virus spread continues to intensify, we implemented standard operating procedures to ensure the safety and success of air evacuation flights while managing risks effectively. We continue to invest in the best equipment available, including portable isolation units, modern aircraft avionics, and fleet upgrades, to ensure the highest standards of flight safety and patient care. Apart from these resources, we place a high premium on training our pilots, medical professionals, engineers, and ground crew, which includes annual simulation training and drills.

We work tirelessly around the clock to ensure the safest possible air transfer and the best possible care for our patients at all times, and I am extremely appreciative of the entire AMREF Flying Doctors team for their unwavering support.

"We work tirelessly around the clock to ensure the safest possible air transfer and the best possible care for our patients at all times, and I am extremely appreciative of the entire AMREF Flying Doctors team for their unwavering support"



...a Flight Nurse

Maggie Muthoni

As an emergency flight nurse for AMREF Flying Doctors, not every day is the same. We've prepared ourselves in such a way that we expect to work exclusively with different types of patients who are in need of immediate medical attention. To be an emergency flight nurse, we need to have critical care experience, since we operate in a pre-hospital set-up. This provides a level of excitement that is difficult to match within the nursing profession.

Let's get to how my typical workday begins. My day starts with checking in at AMREF Flying Doctors. Our working routines are controlled by a schedule that keeps all emergency flight nurses on standby in the call of duty. Being a 'first on call' means you will respond to the first emergency call: 'second on call' respond to the second emergency, and so on. To do this effectively, there are various things that need to happen.

Packing and Double Checking the Medical Kit

After arriving at work, we proceed to the medical emergency store to await flight confirmation. We review all of the patients' triages and begin assessing and preparing their transfers as soon as we receive the call. We compile a case file with pertinent patient information and make sure we have all of the medical equipment we'll need to handle any problems that might arise as a result of the patient's condition. We keep a checklist in hand, in case of an emergency, to help us prepare the necessary equipment for the patient.

During the Flight

As flight nurses, we are trained to understand the psychological distress that a patient may experience during a flight. As a result, we assist patients in any such situation that may arise while we are flying. We also keep track of any additional signs and symptoms the patient exhibits. To keep the patient stable, we also keep track of medication times and conduct regular checkups.

"To be an emergency flight nurse, we need to have critical care experience, since we operate in a pre-hospital setup. This provides a level of excitement that is difficult to match within the nursing profession."

After Landing

Upon landing, we oversee the patient's disembarkation from the plane and ensure they are on board the ground ambulance safely before accompanying them to the hospital. Since the operations team has already handled all the air travel and the complexities involved in getting through the check-in process, including security, and customs and immigration for international flights, this process is swift. We then hand over the patient to the hospital medical team, together with the case file, and the patient is immediately attended to.

In Conclusion

A flight nurse's speed is similar to that of a paramedic; you must be ready to go at any moment, anywhere, and have a genuine desire to help others in order to be successful.



Stephen Gitau

AMREF Flying Doctors CEO shares the organisation's experiences since the outbreak of COVID-19



How did AMREF Flying Doctors adapt to the global lockdown and the transportation of patients during the pandemic?

The spread of COVID-19 into the Eastern Africa region presented a slew of operational and business challenges to AMREF Flying Doctors, both locally and internationally. Our capacity to move patients from the region into Nairobi – the regional centre of medical excellence – and onward transfers to international destinations was initially seriously compromised. The shutdown of the hospitality industry, as well as restrictions on international, regional, and local travel, meant that we were unable to provide the majority of our air ambulance and related services.

As a professional air ambulance service provider in the region, we saw value in partnering initially with the Government of Kenya – supporting it logistically with the movement of medical personnel and delicate medical equipment to remote areas for its COVID-19 response efforts. This aided in the strengthening of relationships and paved the way for AMREF to obtain critical support and clearances necessary to continue domestic,

regional, and even international flights.

Additionally, in order to mitigate commercial flight restrictions and associated logistical complications, we chose to increase our wing-to-wing partnerships. This contributed significantly to the continuity of regional and international patient transfers into and out of Africa.

What measures do you have in place to enable business continuity and to ensure the safety of your staff and customers?

Due to the highly infectious nature of COVID-19, we had to take strict measures to ensure that our medical, air, and ground crews could handle patients safely. We have so far invested in six portable patient transport chambers and other related medical equipment, such as PPE.

AMREF Flying Doctors became the first air ambulance service provider in East and Central Africa – and the first emergency response organisation – to make this investment. We successfully transported over 20 COVID-19-related cases within the first six weeks of using the isolation chambers, and



have since successfully transported more than 300 COVID-19-associated cases.

Additionally, we implemented a strict work-from-home policy for non-essential employees and later implemented a rotational reporting system for all staff members. This has worked exceptionally well in supporting our 24/7 emergency operations while exposing staff to the lowest possible level of COVID-19 infection.

What have been some of the critical challenges for AMREF Flying Doctors since COVID-19 was declared a pandemic?

The immediate challenge was the health risk posed to our staff, clients, and the general public as we sought to continue providing services even in the context of COVID-19. This was especially true in the early stages of the outbreak, when information about it was hazy and dynamic.

The second challenge was the impact on our bottom line as a business, particularly in light of the industries we serve, such as the insurance and assistance market, the tourist market and others who were heavily negatively impacted by the outbreak.

Thirdly, the logistical nightmare created by the closure of borders, restrictions on travel and the movement of people, and other government directives aimed at halting the virus' global spread. Again, this was exacerbated by the fact that these directives and restrictions changed over time, making it extremely difficult to plan, manage costs, and commit to the missions requested by clients.

How have you met and overcome these challenges?

Regarding the health risk and exposure to our stakeholders, we immediately formed a taskforce led by our medical director, which reviewed and put together protocols affecting all areas of our operations at the onset of the outbreak. These protocols enabled us to continue operating with minimal disruption, lobby various governments and authorities for mission exemptions, and foster a reassuring work environment for all our stakeholders. This taskforce is still operational today and continues to play a vital role in guiding our daily operations and critical areas of our business.

Let us say that when one door closed, another one opened in terms of the commercial impact on our revenue. To begin with, the near decline in business from visitors to Eastern Africa was replaced by an unprecedented increase in demand for regional and international transfers – including numerous cases involving COVID-19. As a result, our swift decision to expand our capacity for transporting highly infectious patients quickly began to bear fruit. Secondly, due to our strong relationship with the Government of Kenya and several public sector agencies, we were able to secure an assignment to train staff from various government agencies at Eastern Africa's eight international airports in preparation for the airports' resumption of service. We believe this had a significant ripple effect, not only on the company's profile, but also on our bottom line during these trying times.

We took a two-pronged approach to overcoming logistical obstacles. One was establishing close ties with regional governments and authorities. From the onset of the outbreak, we maintained contact with the region's relevant government agencies, offering our assistance and insight where possible and providing information that would help them understand the critical need for us to continue providing our services. Second, was providing support to our

“We seek to build better collaborations and partnerships with other institutions to ensure that as many people as possible in the region become members of the Maisha air and ground ambulance plan and have direct access to our services in times of need.”

operational staff, who saw their workload per mission increase significantly as a result of the numerous and constantly changing protocols required to conduct a successful medevac mission. The management also became more involved in day-to-day operations to ensure that mission-critical staff received the support they required at various operational touchpoints and worked in a supportive environment to ensure the best outcome possible in a challenging situation.

What will be your main business focus in the near future and going forward?

Given the learnings from operating in the COVID context and in line with our company strategy, we are looking to strengthen our capability to respond to such health crises should they occur in the future. This is with the intention of continuously reviewing market innovations to which we can adapt much more quickly than in the past, thereby assisting us in better preparing for such occurrences.

Secondly, we seek to build better collaborations and partnerships with other institutions to ensure that as many people as possible in the region become members of the Maisha air ambulance plan and have direct access to our services in times of need.

Lastly, we will continue to invest in critical strategic capabilities that maintain our market leadership for the benefit of our customers.

Out to Save Lives

Why Charity Evacuation Missions?

Access to medical care can be expensive and challenging, especially in third-world countries. Sir Michael Wood, Archibald McIndoe, and Thomas Rees, the founders of AMREF, identified this gap in East Africa in 1957 and began healthcare projects for people in rural and remote areas. Over 60 years later, AMREF Flying Doctors, a subsidiary of Amref Health Africa, remains committed to providing a wide range of medical services, medical assistance services, and Emergency Life Support skills training. We also support Amref’s humanitarian work, which aims to increase sustainable health access to communities and provide lasting health change in Africa. AMREF Flying Doctors invests in the evacuation of patients in Kenya who need urgent medical attention but cannot afford it, such as those involved in road traffic accidents, pregnancy and birth complications, and inter-tribal wars, among

others. We also conduct regular missions on behalf of the Government of Kenya through the Kenya National Disaster Operation Centre (NDOC).

These charity missions are carried out under exceptional circumstances in partnership with the county government, rural medical

facilities, Kenyatta National Hospital (Kenya’s largest referral hospital), and other private medical institutions. Over the years these humanitarian missions have had tremendous impact in various communities, which is evident in the number of such missions completed.

The process

In emergency situations, AMREF Flying Doctors is usually contacted by good Samaritans, hospitals in remote areas with critical patients, or county government officials. The medical team then critically reviews the request, taking into account the patient’s condition and the availability of a receiving hospital to treat the patient. This information is then relayed to management for the evacuation to be approved on a charity basis.

After approval, the medical team proceeds to create a case file containing all pertinent patient information. They ensure that the medical supplies necessary to deal with

“In most charity evacuations, patients are transferred to Kenya’s largest referral hospital for high-quality medical care.”





any complications that may arise due to the patient's condition are on hand. The flight operations team, their aeromedical counterpart, oversees the clearance of the mission, the aircraft required, the landing location, and the security measures that must be in place before dispatching the flight. They also collaborate with the local community to conduct a physical inspection of the landing area prior to take-off.

When the medical team arrives at the scene, they typically receive a case brief from the medical team on the ground attending to the patient before stabilising them for the flight. While onboard, they keep track of any additional signs and symptoms the patient exhibits by performing regular checkups.

Once in Nairobi, the patient is received by the AMREF Flying Doctors' advanced life support ground ambulance at Wilson Airport and taken to the agreed hospital. In most charity evacuations, patients are transferred to Kenya's largest referral hospital for high-quality medical care.

Case Study

AMREF Flying Doctors received a distress call on 6 October 2020, requesting the immediate airlift of patients from Elwak village, Mandera County. This came after at

“AMREF Flying Doctors invests in the evacuation of patients in Kenya who need urgent medical attention but cannot afford it, such as those involved in road traffic accidents, pregnancy & birth complications, inter-tribal wars, among others.”

least six people were injured when their bus was attacked by suspected terrorists. Mandera is a semi-arid region in northern Kenya, bordering Somalia and Ethiopia. It is a frequent target of terrorist attacks.

Despite the devastation caused by climate change and insecurity, it is one of the counties in Kenya that is making significant progress toward achieving the Sustainable Development Goals (SDGs).

The primary patient – an 18-year-old form-four male student – and other critically injured passengers were admitted to Mandera County Hospital shortly after the incident. The 18-year-old's medical condition was critical and beyond the capacity of the hospital, necessitating specialised care in Nairobi. The Mandera County Hospital, in collaboration with the Mandera County Government, requested assistance from AMREF Flying Doctors with the patient's evacuation.

The management of AMREF Flying Doctors, led by the Medical Director, then convened a virtual meeting with officials from Mandera county and the healthcare facility to discuss logistics and the likelihood of a successful transfer. AMREF Flying Doctors agreed to cover the entire cost of the evacuations, which averaged around US\$10,000.

AMREF Flying Doctors invests in the evacuation of patients in Kenya who require emergency medical attention but lack the financial means to afford it. These humanitarian missions are undertaken in exceptional circumstances.

More Flights as Covid-19 Bites

What is wing-to-wing medical evacuation?

Wing-to-wing medical evacuations are partnership agreements in which one provider picks up the patient and flies to a mid-point to rendezvous with another provider, who completes the evacuation mission.

AMREF Flying Doctors makes formal agreements with its partners that clearly define the level of care and professionalism that each partner will maintain, as well as the services that each will provide on every wing-to-wing mission.

Any air ambulance mission requires planning

and coordination, but a wing-to-wing mission requires a meticulously organised hand-over. AMREF Flying Doctors identifies its wing-to-wing partners based on:

- Their expertise
- Their reputation
- Their medical treatment capability
- Their excellent mission standards

To confirm the above requires thorough research, which is always necessary before engaging in such an agreement. This also helps in building a high level of trust between the providers, which is a key element in a partnership.

The importance of this format

- Wing-to-wing missions enable a faster response time by allowing the patient to be picked up by a local company and the journey begun sooner, i.e. while the remote provider is en route to the hand-over point.
- Not only does reducing travel time to the patient result in a faster pick-up, but it also helps with crew rest time constraints on long-range missions.
- It may be advantageous for each provider to cover the portion of the mission that takes place in a region they are familiar with.
- Partnerships may also provide marketing and brand awareness benefits.

AMREF Flying Doctors' experience

AMREF Flying Doctors has seen an increase in wing-to-wing air ambulance evacuation flights since the start of the COVID-19 pandemic.

Increased commercial flight restrictions and logistical complications made it more difficult for clients to fly on routine commercial flights and even more difficult for providers to obtain permissions for landings or night stops in certain countries.

By forming wing-to-wing partnerships with other operators, AMREF Flying Doctors was able to ensure the continuity of regional and transcontinental patient transfers.

“With the tightening of travel restrictions, long-distance patient transfers have become a logistically challenging exercise,” Dr Joseph Lelo, Medical Director, explained. “With the closure of numerous airports worldwide, as well as subsequent denial of crew rest stops and restrictions imposed by multiple government agencies, AMREF Flying Doctors has found it more convenient to rely on wing-to-wing arrangements.” We provide our clients with options for any particular mission and are transparent about them, in order for an informed medical transfer decision to be made.



“By forming wing-to-wing partnerships with other operators, AMREF Flying Doctors was able to ensure the continuity of regional and transcontinental patient transfers ”



PARTNERSHIPS YIELD BEST SOLUTIONS



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AMREF Flying Doctors - Isuzu East Africa and Family Bank

AMREF Flying Doctors recognizes the value of strategic business partnerships in achieving business growth. Such business partnerships with industry leaders continue to be a critical component of our strategy for expanding and enriching our business.

Partnership between AMREF Flying Doctors and ISUZU East Africa & Family Bank

On June 29, 2020, Isuzu East Africa, Kenya's leading commercial vehicle manufacturers, signed an agreement with Family Bank to offer 95% financing to Small and Micro Enterprises (SMEs) customers to purchase vehicles. AMREF Flying Doctors will therefore provide the SMEs with two Maisha Air and Ground Ambulance covers for each vehicle purchased.



L-R; Rita Kaveshe (MD, Isuzu East Africa), Kangangi Wanjohi (Division Director, Sales & Marketing, Isuzu East Africa), Stephen Gitau (CEO, AMREF Flying Doctors), Rebecca Mbithe (CEO, Family Bank)



AMREF Flying Doctors and Standard Chartered Bank

Partnership between AMREF Flying Doctors and Standard Chartered Bank Kenya

Additionally, on 14 July 2020, we entered into a partnership with Standard Chartered Bank Kenya to provide emergency medical evacuation services to the bank's clients at a preferential rate. The partnership was one of the Standard Chartered Bank Kenya initiatives to assist its clients in navigating the COVID-19 storm.

These partnerships play an integral role in allowing us to continue delivering services to those who need them and, ultimately, save lives. By partnering with reputable businesses in a variety of industries, AMREF Flying Doctors earns the public's trust in providing emergency medical evacuation services.



Rwanda Inaugural Cocktail Event

In early March, AMREF Flying Doctors hosted an inaugural cocktail event in conjunction with the Kenya High Commission in Rwanda. The event was held to promote the presence of our subscription offering for the domestic market as well as the Kenyan diaspora in Rwanda. It also aimed to raise awareness of our air ambulance capabilities in the region, as well as internationally.

The cocktail event was attended by a broad sector of clients, partners and other stakeholders, including representatives from the Rwandan Government, diplomatic missions, the health sector, non-governmental organisations (NGOs), the tourism industry, and the media.

“Tonight’s event is the culmination of a very successful and meaningful two-day discussion with many of you.” said Stephen Gitau, Chief Executive Officer, AMREF Flying Doctors, following the event.



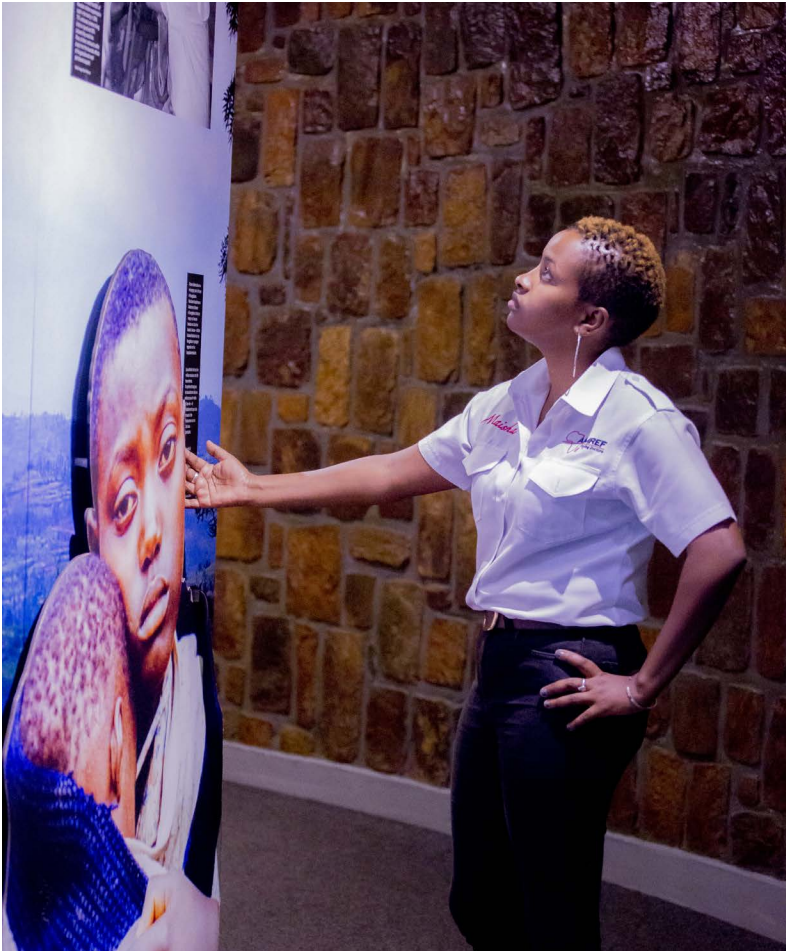
“It is also a good starting point for many more important engagements as we seek to raise awareness and appreciation of air ambulance services among both individuals

and organizations.”

Although AMREF had been carrying out emergency medical evacuations in and out of Rwanda to different parts of the world, we

“We have already conducted many medical evacuations in Rwanda, which involved the transfer of patients to more specialized medical facilities.”





were seeking to expand our footprint and accelerate our market penetration in the country.

“We have already conducted many medical evacuations in Rwanda, which have involved the transfer of patients to more specialised medical facilities.” Gitau added.

“Fortunately, in all of these cases, lives were saved, and patients recovered. We believe that many more patients who require this service will benefit from it.”

Whilst in Rwanda, the management team had the opportunity to visit the genocide memorial, engage with key government ministries, and pay a courtesy visit to the Kenyan Embassy (High Commission). The CEO was also hosted at a local radio station where he expounded the need for air ambulance services and the capacity of AMREF Flying Doctors to help the region in this regard.

The event was uniquely successful and a good start to the first quarter of 2020.

Clockwise from top left; A press conference; Visiting the Kigali Genocide Memorial; Laying wreath from AFD in honour; Guests at the cocktail event; AFD team at cocktail event; Courtesy call at the Kenya High Commission in Rwanda.



THE CAPTAIN'S PRIZE

AMREF FLYING DOCTORS PARTICIPATED AS ONE OF THE SPONSORS IN THE CAPTAIN'S PRIZE EVENT AT MUTHAIGA GOLF CLUB

Towards the end of the year, in November 2020, AMREF Flying Doctors sponsored two golf tournaments at Muthaiga Golf Club as part of our brand promotion activities and as a drive for the Maisha product subscription. The two tournaments were the Lady Captain and the Captain's Prize.

The Lady Captain event was held over two days, while the Captain's Prize was held over three days; both with a strong turnout. AMREF's participation was exemplarily with our CEO scoping a prize in the Lady Captain tournament.

Both tournaments offered great visibility for the AMREF Flying Doctors brand, as well as strong opportunities for engagement with participants regarding the Maisha subscription product. We also saw impressive traction and engagement on our social media platforms while promoting these events.



HIGHLIGHTS



AMREF Flying Doctors golf teams were represented by our CEO Stephen Gitau, Medical Director Dr Joseph Lelo, Chief Operating Officer Mike Black, our two board members Kellen Kariuki and Jane Mbatia. Our team was also joined by one of our former pilot David Muhia and one of our local partners George Nyakundi.



INTERNATIONAL CONFERENCE

AMREF Flying Doctors continues to participate in international events as a means to network, strengthen international working relationships and participate in international debates about the standard and quality of global air ambulance provision, as well as promote and maintain the market development of our vital services.

In the advent of COVID-19, global authorities put a temporary halt to travel and face-to-face gatherings to minimise the spread of the virus. As in any other organisation, we needed to pivot sharply and pursue a strategy of maximizing technology to maintain international relations.

From 3rd to 5th November 2020, representatives from the global travel and health insurance industries convened for the first virtual ITIC Global conference - ITIC Connected -

which was attended by AMREF Flying Doctors' Executive and Marketing teams. A packed agenda of speaker presentations, industry forums and networking sessions provided a platform for vital discussions and the sharing of information on key topics, including how the industry has been navigating COVID-19 and how it is using this time to prepare for the future. Dr Joseph Lelo of AMREF Flying Doctors spoke at the Medical Directors' Forum about the transportation of COVID-19 patients and detailed the difficult repatriation of a 45-year-old male being treated for COVID-19 from Sana'a, Yemen, to Belgium. This case involved working against a multitude of challenges, including an insufficient healthcare system in Yemen, which saw the ground ambulance run out of oxygen, and an emergency intubation of the patient pre-flight, as well as demanding in-flight oxygen requirements.



ITIJ MARKETING CAMPAIGN OF THE YEAR AWARD



AMREF Flying Doctors was named as one of three finalists in the 2020 International Travel & Health Insurance Journal (ITIJ) industry awards for Marketing Campaign of the Year.

Africa to the rest of the world' campaign that earned us the nomination. Additionally, we wanted to convey our strong capabilities and experience operating in and out of this region, despite it's customary challenges.

"This nomination reaffirms our unwavering commitment to providing outstanding service to our clients"

The ITIJ Industry Awards recognise providers in the global travel and health insurance industries who have gone above and beyond the call of duty in a 12-month period, to contribute to the industry's excellence. The winners were announced on 5 November 2020 during a virtual awards ceremony.

"We are very pleased that our work has been recognised despite the challenging year we've had." commented Stephen Gitau, AMREF Flying Doctors CEO.

We wanted to highlight the strength of our strategic location in East Africa and the endless opportunities for partnerships and services for the industry when we developed the 'from

"This nomination reaffirms our unwavering commitment to providing outstanding service to our clients. I would like to commend our talented staff on their daily efforts to provide our clients with the best services possible. I am extremely grateful to them and proud of the entire team."

My STORY

DICKSON KADIMA Systems and Networks Administrator

AMREF Flying Doctors is a fast-paced environment, and if you are not quick enough, you will miss out on every opportunity. As the master who understands my way around computers, stacks of servers, routers and switches, firewalls, operating systems, and a plethora of protocols, I give it my all knowing that this role is the backbone of the organisation. Just like any other business, seamless communication is also essential in providing air ambulance services; calls, emails, every little bit of it. Even though it can be a tough job at times, especially amid COVID-19, I can attest that

AFD support, particularly in providing the necessary equipment and back-up, has enhanced the smooth flow. As a person who enjoys taking on new challenges, I find satisfaction in solving problems and knowing that my efforts make others' jobs easier. My technical knowledge and abilities give me the foundation and confidence to be that expert. In this regard, it is necessary to always be alert, never be faint of heart, to remain disciplined, resilient, gratified to help others, situation-aware, and, of course, to be a team player; in short, there is never a dull moment in my line of duty.



COVID-19 RESPONSE IN AFRICA

Since the World Health Organization (WHO) declared COVID-19 outbreak a global pandemic, Amref Health Africa has been responding to the virus in ten countries across East, West and Southern Africa. These include Kenya, Tanzania, Uganda, Rwanda, Ethiopia, Zambia, Malawi, South Africa, Senegal and Guinea.

As a partner to the WHO African Region and Africa CDC, Amref was enlisted in the emergency-response taskforces of the Ministries of Health in Ethiopia, Guinea, Kenya, Malawi, Senegal, South Sudan, Tanzania, Uganda and Zambia. By sharing its technical expertise and leveraging its strong relationships with communities, Amref has contributed to shaping the national strategy on COVID-19. Amref Health Africa's approach to responding to the virus is multilateral, taking on the crisis at all levels. While its long-established, robust relationships at global, regional and national levels make it well placed to advise on country policy, it remains acutely aware that without community buy-in, actions taken to stop the pandemic will fail. This explains why Amref's response is grounded in community engagement and awareness-raising, delivered through a network of Community Health Workers (CHWs).

Guided by three principal objectives, Amref's response has focused on preventing transmission, preventing deaths, and preventing social harm. For Amref, it was important to address both the immediate and the secondary impact of COVID-19, taking into account the potential long-term effects on other structural health system issues, as well as the wider social and psychological impacts, including stifled youth opportunities and increasing rates of gender-based violence (GBV).

A total of 74 COVID-19 response projects

have been implemented, 29 of which relate only to COVID-19 and 45 of which are regular projects with COVID-19 components.

COVID-19 Projects	74
COVID-19 Only Projects	29
Regular Projects (with COVID-19 components)	45

Our specific interventions in Africa have focused on: research, advocacy and policy development; capacity building for health workers; supporting work places to ensure continuity of economic activities; supporting flow of goods and continuity of trade between countries; water, sanitation, hygiene-infection prevention and control (WASH-IPC); service delivery including COVID-19 testing; procurement and distribution of PPE to health workers; COVID-19 disease surveillance, partnerships and business development for COVID programming among other areas.

• Research, Advocacy and Policy Development

Being a new disease, Amref rolled out research studies into COVID-19 in various areas, including, but not limited to: KAP surveys on COVID-19 in various population segments, including the youth and people in informal settlements; the effect of COVID-19 on the continuity of other health and nutrition services; health governance in the era of COVID-19 and how to effectively use community health workers (CHWs) in the COVID-19 response.

At the same time, policy briefs have been and continue to be developed to support governments to develop home-grown policies and guidelines on COVID-19.

Innovative approaches that integrate messaging on prevention of GBV, female genital mutilation and cutting (FGM/C) and child marriage have also been introduced into the COVID-19 advocacy agenda and are being disseminated by CHWs, as well as by the youth through various multimedia platforms. Amref has been participating in policy development at various levels and is represented by the Group Chief Executive Officer at Africa CDC in each country, various staff sit on national, regional and district-level COVID-19 response committees, where they influence policies in the areas of risk communication and community engagement, including the need to recognise the crucial role of CHWs.

Amref has also been building advocacy and communications capacity for various demographics, including youth and FGM/C champions. Amref set up a COVID-19 Information Center where critical information regarding the virus could be accessed. A comprehensive social media toolkit was also developed with the goal of disseminating critical information through various social media platforms; plus a number of media-focused webinars were developed to enhance education for journalists as they reported on the pandemic, with the aim of curbing misinformation and disinformation. In addition, a bi-weekly webinar series named 'The Africa Dialogues: A COVID-19 Response Webinar Series' was established in partnership with Dalberg, aimed at helping its audience make more informed decisions in times of crisis. Over ten webinars were held, with an average of 450 people in attendance at each. Amref's Youth in Action (Y-Act) team have also been committed to ensuring young people are meaningfully engaged in the fight, giving them the opportunity to contribute to policy decisions that will ultimately affect them. Youth-led teams have been established to work alongside policymakers

to co-create long-term solutions. Y-Act and AfRika (youth movement) interventions have reached over 10 million young people online through various social media campaigns in the wake of COVID-19.

• Capacity Building for Community Health workers and Health Workers

Since the start of the COVID-19 pandemic, Amref has been strengthening the capacity of health workers, including CHWs, who are key in bridging the gap between the community and the formal health system, to respond to COVID-19. Amref trained a total of 111,694 healthcare workers, including 109,683 CHWs and 2,011 facility-based health workers, and distributed PPE in Kenya, Guinea, Malawi, Rwanda, Senegal, South Africa, South Sudan, Tanzania, Uganda and Zambia. The Africa CDC has also collaborated with Amref through the Partnership for Accelerated COVID-19 Testing (PACT) to roll out a robust contact tracing system across all communities in member states. As a new disease, there was no curriculum for training CHWs or healthcare professionals on COVID-19; so, in collaboration with governments, Amref supported the development of curricula and content for training CHWs and healthcare professionals to take up their roles in community education, health promotion, case detection, contact tracing and referrals. In Kenya specifically, Amref supported the Ministry of Health to digitise COVID-19 courses created for CHWs and healthcare professionals and these were uploaded onto Amref’s Leap platform for ease of access. The training aimed to reach the vast majority of CHWs in the country, with similar initiatives taking place in Malawi, Uganda, Ethiopia and Zambia. The key COVID-19 messages and training modules on the Leap platform and have been deployed to CHWs in English, Kiswahili, Amharic, Luganda and Chichewa. The Institute of Curriculum Development supported the development of four courses aimed at healthcare workers.

• Supporting Workplaces to Ensure Continuity of Economic Activities

Amref is supporting workplaces such as banks, supermarkets and open markets to make them safe for continued economic activities. This helps with the mitigation of economic harm resulting from COVID-19 and associated control measures. The support includes training on COVID-19 control, the setting up of handwashing points and establishing workable infrastructure for physical distancing. The Kenya Bankers’ Association, which has membership from 47 banks, sought Amref Health Africa’s expertise to support its preparedness and response efforts. The three-month engagement that started in April 2020 focused on providing information and insights to leadership and staff within the banking industry. This was done through: i) a series of webinars for the banks’ CEOs and staff, ii) the curation

“For Amref, it was important to address both the immediate and the secondary impact of COVID-19, taking into account the potential long-term effects on other structural health system issues.”

of learning content deployed through KBA’s digital learning platform, iii) the creation and deployment (opt-in) of key messages around COVID-19 via Amref’s Leap platform, and iv) the provision of advisory services with access to a COVID-19 Q&A email service. Over 300 bank staff attended the series of webinars. KBA and its members appreciated the insights provided into the pandemic and the health system’s response to their industry, societal and individual concerns. In support of the reopening of regional economies, AMREF Flying Doctors rolled out COVID-19 preparedness ‘Training of Trainers’ (TOTs) for airport and border personnel in the East African Community states. Funded by GIZ, the objective of the training was to enhance the capacity of these personnel in COVID-19 infection detection, prevention, and in communicating related risks to travellers. In addition, Amref Zambia, the national task-force for responding to COVID-19, launched a new project – ‘Nobody is Left Behind’ – to provide the distribution of educational materials in braille via 71 outlets,

including schools and libraries. Furthermore, in collaboration with the Ministry of Health in Zambia, Amref developed and distributed 3,000 information, education and communication (IEC) booklets about COVID-19 for the visually impaired.

TRAINING OF HEALTH CARE WORKERS THROUGH LEAP			
Total	Male	Female	
Health Workers trained through LEAP and have completed the course.			
111,694	34,653	77,041	
Community based health workers			
109,683	33,424	76,259	
Facility based health workers			
2,011	1,229	782	
Courses Developed by ICD			4

• Supporting Flow of Goods and Continuity of Trade between Countries

COVID-19 has disrupted the movement of goods and people between countries, increasing the possibility that countries will lack essential goods needed to sustain economic activities as well as health services. Amref developed programmes to mitigate the spread of COVID-19 between countries by creating safe trade corridors at border points, both for local populations as well as for long-distance truck drivers who ensure the supply of essential commodities across regions. Amref signed an MOU as a technical partner to support Trademark East Africa (TMEA) to contribute to the goal of unlocking trade across countries by reducing the barriers occasioned by the COVID-19 pandemic. Amref has been supporting the border points with capacity-building to ensure the appropriate use of PPE, including the disposal of such equipment.

• Mobilising and Distributing PPE to Protect Health Workers

Amref has mobilised funds and continues to work with existing partners and donors to purchase and distribute PPE to CHWs and facility-based health workers. The aim is

to protect health workers from infection so they can continue to provide health services safely. As such, Amref recommends that the provision of PPE is integrated into all health programmes. In Malawi, Amref procured and donated PPE in response to a request from the Ministry of Health to its partners, as there was a critical need for such equipment by the country’s health workers. The PPE was handed over to the Ministry.

With the support of the Coca-Cola Foundation, we have trained 50 young mothers and women from Dagoretti (previously training in fashion and design) on mass production of PPE at the Amref Dagoretti Fashion and Design Centre. The centre can produce 20,000 surgical masks and 100 medical gowns per month with the capacity to increase production based on demand.

• **Water, Sanitation, Hygiene-Infection Prevention and Control (WASH-IPC)**

Through its water sanitation and hygiene programmes, Amref is implementing a set of WASH-IPC high-impact public health interventions against COVID-19, both in communities and at health facilities. Amref has developed an innovative COVID-19 Combination Preventive Approach (CCPA) that advances a package of intervention, focusing on; (i) promoting hand hygiene (hand washing or hand sanitisation); (ii) decontamination and fumigation in high-risk public places; (iii) infection prevention in health facilities; (iv) safely managing COVID-19-related waste in communities and healthcare facilities; (vii) the provision of water and sanitation to ensure continuity of WASH services. Monitoring and evaluation data shows that 3,961,157 people received WASH interventions from Amref, including 1,866,479 males and 2,094,678 females.

In collaboration with its partners at the National Business Compact on COVID-19 (NBCC), Amref is implementing an innovative project based on behaviour change in Kenya, Uganda and Tanzania, targeting around 25 million people with knowledge about sustained hand hygiene behaviour through mass media, digital communications and

interpersonal communication. An estimated US\$3.7 million has been invested in the procurement and distribution of over 10,000 handwashing stations and in support of behaviour change communications across the three countries. Additionally, our long-standing partner East Africa Breweries Limited

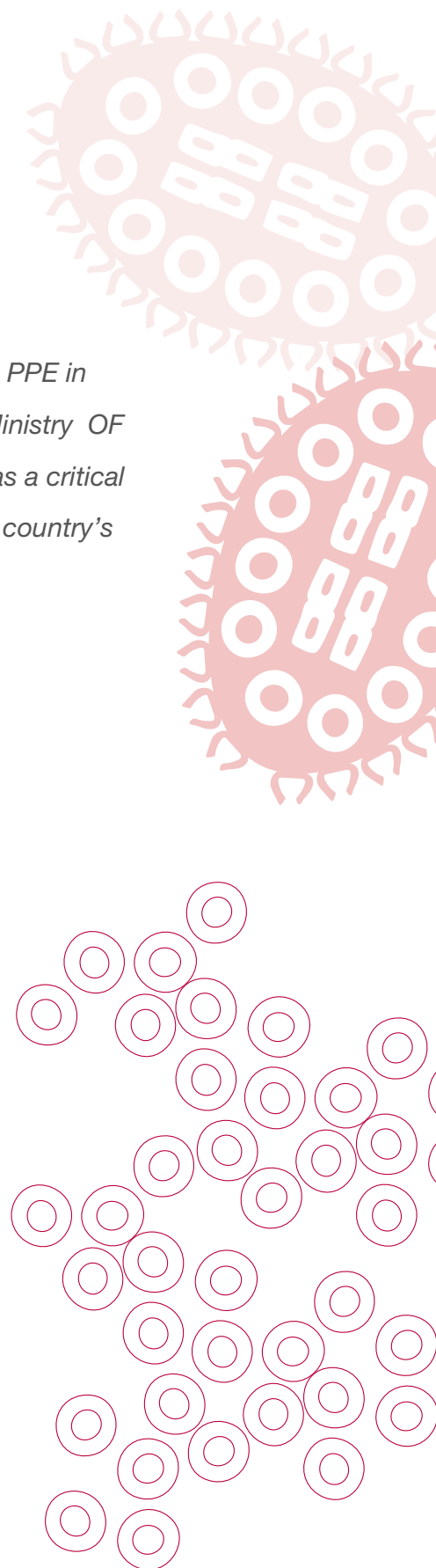
“Amref procured and donated PPE in response to a request from the Ministry OF Health to its partners, as there was a critical need for such equipment by the country’s health workers.”

provided over 400,000 litres of ethyl alcohol-based sanitisers to support hand hygiene actives in informal settlements in Kenya where access to water for hand washing is scarce. Through our partnership with the Coca Cola Foundation, Amref is empowering women to make soap and sanitisers as local enterprises which have the dual-pronged benefits of economic empowerment and increasing access to COVID-19-prevention commodities at the community level.

WASH - People receiving WASH interventions from Amref (eg: constructions, renovations, supplies and other WASH related support)		
TOTAL	MALE	FEMALE
3,961,157	1,866,479	2,094,678

• **Service Delivery**

COVID-19 Testing: Amref has a two-pronged strategy to increase COVID-19 testing – provide testing services at the Amref Central Laboratory (ACL) in Nairobi, and support



government laboratories to scale up testing. In Kenya, following approval to support national COVID-19 testing in June 2020, ACL has been supporting the Ministry of Health with COVID-19 testing services through private-sector partnerships. Currently, ACL is conducting testing for individuals and is supporting employers to test their staff. In South Sudan, Amref has been supporting COVID-19 testing at the Ministry of Health's National Public Health Laboratory (PHL) through the provision of technical advisory services, the strengthening of laboratory work processes and laboratory information management systems and co-implementation of the decentralisation of COVID-19 testing.

COVID TESTING		
People tested for COVID-19 through Amref laboratory		
TOTAL	MALE	FEMALE
13,521	7,747	5,774

Infection Prevention and Control: AHA has been engaged in infection, prevention and control interventions to ensure the reduction of COVID-19 transmission and to increase health provider confidence in working in a safe environment. In Ethiopia, we started by conducting health facility assessments using WHO tools and used findings to provide training to health workers, provide national guidelines, and conduct supportive supervision in 85 health facilities. This support included the provision of waste bins (proper waste segregation and collection at the site of generation) and handwashing materials, sanitisers, water tankers, disinfectants, face masks and other PPE for health facilities.

Integration of COVID-19 Services with other Health Services: Integration of services is a cost-effective way of reaching populations without weakening the health system through parallel programming. Because Amref has many ongoing projects, this integration strategy is being used to scale up access to COVID-19 services. In Uganda, for instance, COVID-19 services have been

integrated into reproductive, maternal, newborn, child and adolescent health services. In Amuru, Arua, Kitgum, Nebbi, Yumbe, Kabale, Soroti and Lira Districts, advocacy has been undertaken to enhance the continuity of these services by requiring local health authorities to commit resources to ensuring health workers in critical service areas such as ANC and maternity units are protected with PPE to continue delivering services to expectant mothers.

• **AMREF Flying Doctors Support to the COVID-19 Response**

AFD has become an essential link in the COVID-19 response. Other than transporting ill patients, AFD is now involved in transporting equipment as well as specimens for laboratory testing. As the only accredited air ambulance service provider in the region, AFD partnered with the Government of Kenya (through the Ministry of Health) to offer logistical support for the movement of medical personnel and delicate medical equipment to far-flung areas. The rapid spread of COVID-19 also meant an increase in demand for movement of COVID-19 cases in the region, as well as to international destinations. AFD invested in portable patient transport chambers and other related medical equipment such as PPE. Within the first two months of deploying the isolation chambers, AFD transferred more than 25 critically ill COVID-19 cases.

• **Amref International University (AMIU) scaling up the research and training in COVID-19**

AMIU has not only devised strategies for continuity of learning for existing programmes, enhancing its blended learning approach, but has gone on to develop courses focused on COVID-19, as well as research studies to inform policy and interventions, including the following ongoing studies:

- a. Effect of COVID-19 on mental health
- b. Domestic, sexual and gender-based violence in Kenya during the COVID-19 pandemic

- c. Effect of COVID-19 on routine maternal and child health services, including vaccinations, antenatal and postnatal services
- d. Effect of COVID-19 on routine health clinics/services for chronic non-communicable diseases, including cancer, diabetes, cardiovascular diseases and renal diseases
- e. Effect of COVID-19 on health services for people living with HIV and AIDS
- f. Governance and ethics in relation to COVID-19
- g. Investigating the use of local remedies in the alleviation of COVID-19 symptoms
- h. Effect of COVID-19 on use of domestic energy

• **Partnerships and Business Development for COVID Programming**

Our partnerships with the private sector, trusts and foundations have strengthened as these entities seek more information about changes in our programme work resulting from COVID-19 and how to engage in COVID-19 response. For the first time in over eight years, Amref secured general operating support of US\$1.15 million from our partners at the Bill & Melinda Gates Foundation (BMGF) and raised more than US\$30 million for our COVID response in 2020. This has allowed Amref to ensure business continuity and support other critical operational needs. Amref has also taken this opportunity to engage non-traditional partners such as the banking sector, through conducting training and communications to promote customer use of mobile banking; multinational corporations like Coca Cola and Unilever, through advising on hygiene and sanitation as well as risk communication; and others such as cross-border trade organisations, through advising on COVID-19 containment and support along trade routes in Africa. Our convening capabilities have been significant and Amref has co-founded a regional partnership platform - National Business Compact on COVID-19 - with over 30 partners across different sectors, including soap manufacturing, communication, retail, digital, NGO and funding organisations.

Finances and Investments

The year 2020 was marked by the COVID-19 pandemic. The management team at AMREF Flying Doctors was particularly concerned about how the organisation would handle its finances and investments, as it is heavily reliant on such income to achieve its short, medium, and long-term goals. Due to ensuing management decisions, however, we were able to generate a net profit despite the pandemic.

“we implemented a work-from-home policy that required employees to receive training on how to work within the system while maintaining business operations.”

During the year, we strategised on how to maintain cash flow while keeping the business running during the COVID-19 pandemic. We invested in six isolation chambers, which enabled us to transfer COVID-19-positive patients while minimising the risk of infection to our staff. To further safeguard our staff, we implemented a work-from-home policy that required employees to receive training on how to work within the system while maintaining business operations. Having implemented a mechanism to reimburse employees for internet bundles and airtime several years ago, this transition went off without a hitch. Additionally, we implemented an online procurement system that centralises all of the organisation’s purchases and offers, resulting in a centralised point of purchase.

However, we encountered challenges with our Maisha air and ground ambulance subscription plans and our medical assistance revenue lines. Following the travel restrictions imposed

by various government authorities globally, the Maisha and Scheme B subscriptions had a low take-up rate and our medical assistance income was low.

Future prospects

After implementing the online system, the management team gained confidence in the system’s performance and expressed a desire to invest more in information technology (IT) to increase the organization’s efficiency.

Ongoing investment in an internal satellite maintenance station will further address aircraft repair costs and availability at Wilson Airport, thereby enhancing the Group’s future competitiveness.

Additionally, AMREF Flying Doctors is expanding its fleet in order to maintain future competitiveness through improved control over staffing, operational costs, aircraft availability, and pricing, which will be accomplished through the acquisition of a new aircraft.

My STORY

SIMON MAINA
Finance Controller

When you are accountable for keeping pertinent records and handling relevant financial organizational inquiries, you have to be focused and stay up to date with your work duties. This calls for my proficiency in time-management skills and multitasking since this is a dynamic environment. From ensuring that finances are available for a quick scale-up of operations after an emergency, to managing the day-to-day funds needed to run air ambulance services, I work to provide support to the entire project, approving the budgets for supplies and logistical materials. Economic constraints arose as a result of

the spread of COVID-19, making financial planning for the organisational activities challenging. In normal times, our financial planning is based on a driver-based model of budgeting, forecasting, and root-cause analysis. However, in the midst of the pandemic, we had to implement a new systematic approach to financial planning and performance management in order to keep up with the situation. This pandemic, I presume, demonstrated the workforce’s commitment to the company’s financial health. However, the corporate budget was impacted, so we revisited the success plans with the

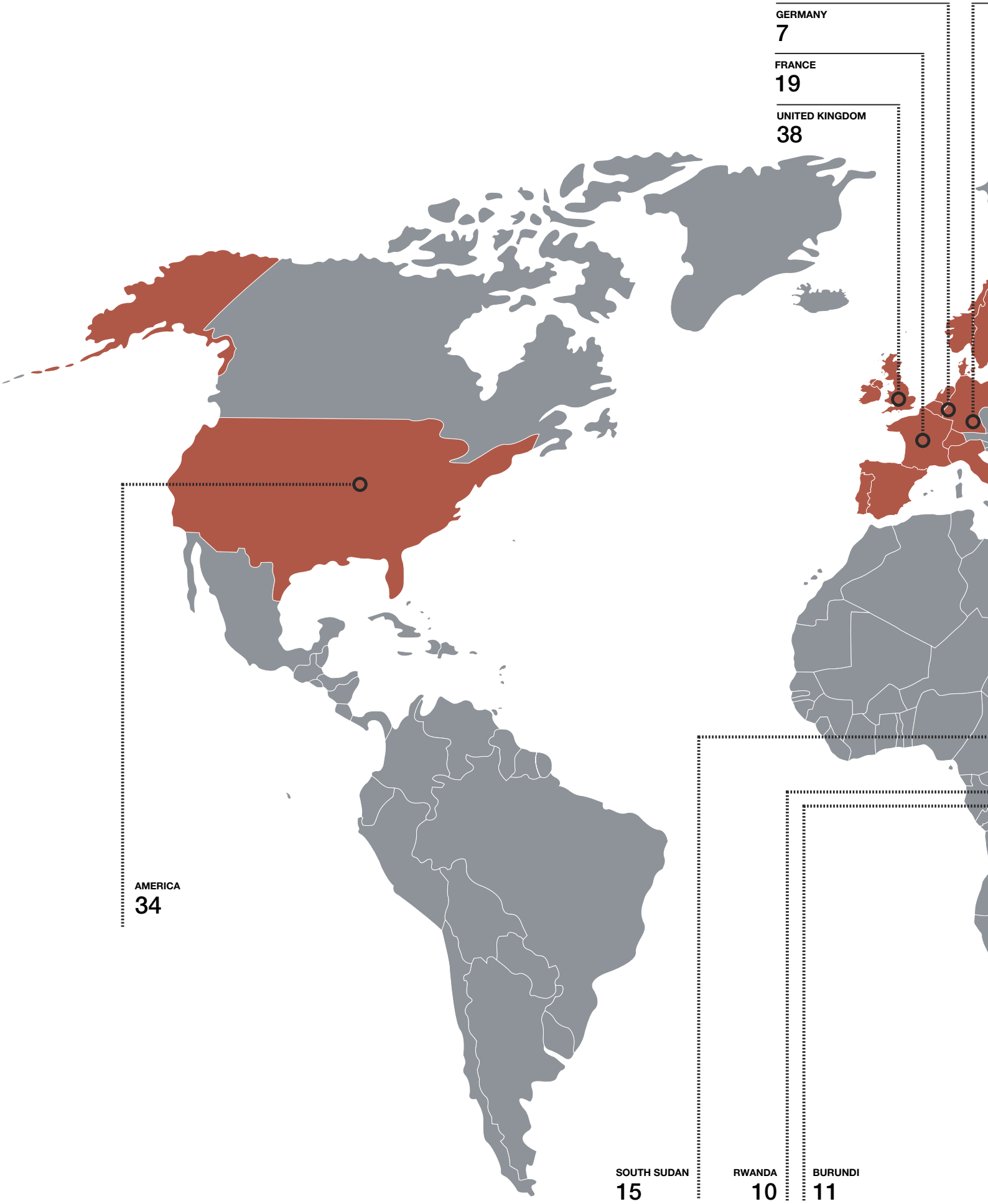


financial planning team, concentrating on programme execution rather than aggregated financial results. This helped employees accept a new working mentality while compensating for incentives that were impacted by economic constraints.

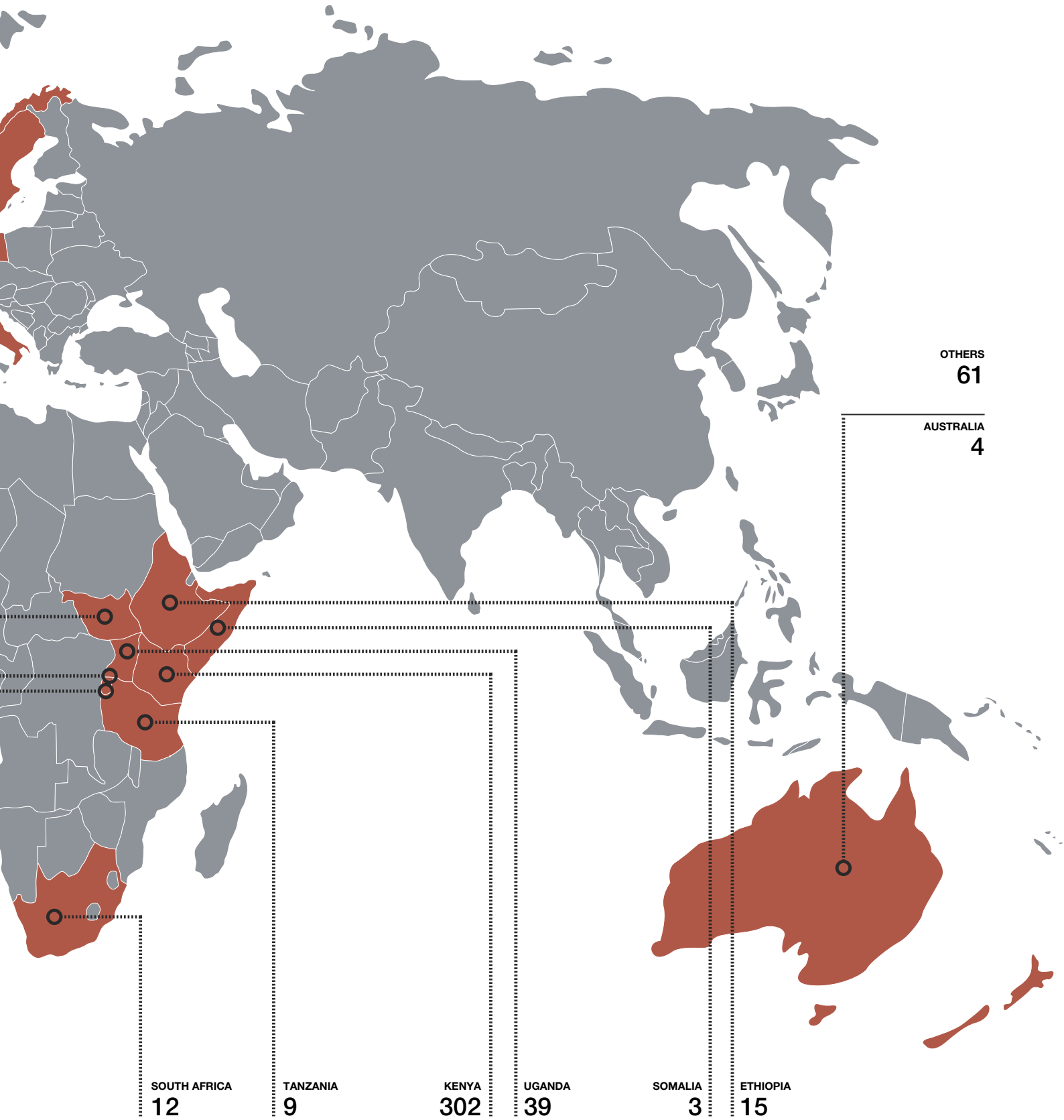
A COVID-19 patient being loaded into AFD Citation Sovereign C680, inside our new Isolation Unit.



EVACUATION BY COUNTRY



EUROPE
43



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Radio Frequencies

HF: 9116kHz LSB / 5796 kHz LSB



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