

## ROMAC

## REFERRAL OF PATIENTS TO ROMAC

ROMAC assists children aged 15 years or younger, by bringing them to Australia or New Zealand for life saving or dignity restoring procedures to improve their quality of life. In special circumstances, older children up to 18 years old may be accepted. Cases are accepted only when the required medical treatment is not available to them in their own country. Priority is given to children in the Region covered by Timor Leste, PNG and the Pacific Islands.

To refer a potential patient to ROMAC:

1. Speak to the patient and to their parent/guardian and obtain as much information as possible to enable completion of the [Referral Form](#). If more information than what we are requesting on the Referral Form is available, please include it as well, as this may be beneficial. The more information you have, and more accurate the contact details you can provide, the better it is. Where patients live in a very remote location try to identify a suitable contact in the closest village/town.
2. Try and obtain a complete medical history of the child if you can. The names and contact details of doctors or hospitals that have treated the child should be included.
3. Obtain or take close up photos from all appropriate angles, with one facing the camera for identification purposes. These photos will be used by the ROMAC Medical Director, in conjunction with the medical information provided, and should clearly show the nature of the medical problem.
4. Establish from a local doctor whether the child meets one of the ROMAC criteria, being that the case cannot be helped in their own country due to lack of appropriate medical skills or facilities.
5. If the country has a Rotary presence, identify the name of the Rotary Club closest to the address of the patient, or any church or religious organisation that would be able to communicate with the patient and help ROMAC to follow up with the inquiry. You may have to get the name and addresses, email contact details and phone numbers of the contacts that would be willing to help us follow the case in that country.
6. Be aware that we cannot help a child that is presently in Australia or New Zealand that has been sponsored by some other person or organisation
7. It is important that you make no promises. The decision to accept a patient cannot be made until ROMAC Board approval is obtained.
8. Advise the parents (or guardians) that it may take some time for the acceptance determination. Every effort will be taken to get back to the parents as soon as possible in life threatening situations.
9. Parents and guardians should be advised that cases outside the [ROMAC Medical Acceptance Guidelines](#) cannot be accepted.
10. Submit the ROMAC Referral Form to the [ROMAC Operations Director](#) in the first instance, either by email or post.
11. If you have any subsequent queries relating to progress of the application for assistance by ROMAC, please contact the Operations Director.

What happens after the Referral Form has been received?

1. The Referral Form should be sent to the Operations Director.
2. Once the case has been registered, the Operations Director will then send the Referral Form and supporting information to the ROMAC Medical Director who, in consultation with other medical specialists, will determine if ROMAC is in a position to assist with the case.
3. If the case is medically acceptable, the doctors will identify a suitable hospital and surgeon to assist with treatment of the child. A quotation for the cost of treatment will be obtained and a proposal will be put to the ROMAC Board seeking approval to the case.
4. ROMAC does not have unlimited funding, and we are very reliant on the generosity of Rotary Clubs and other benefactors for donations to support our work. As such, funding constraints can sometimes limit the number and type of cases that we can accept.
5. Following approval to the case by the ROMAC Board, the family will be required to enter into a formal Agreement with ROMAC.
6. Please note that there can often be lengthy delays in providing treatment, even after approval of the ROMAC Board has been given. ROMAC is very reliant on placements being provided by hospitals across Australia and New Zealand, and the availability of specialist surgeons. Often they have lengthy waiting lists, even for Australian children, and overseas patients unfortunately have lower priority. Even after hospitals have accepted a particular case, they may be forced to delay the treatment, or even cancel, due to other unforeseen pressures on their services.
7. When firm dates for treatment have been obtained, the Operations Director will arrange for the necessary Medical Treatment Visas to be obtained, and also organise air flights to Australia or New Zealand for the patient and their carer.
8. Once travel arrangements are in place, the case will be handed over to the local Regional Director to arrange reception at the airport, together with hosting and support of the patient and their carer whilst they are undergoing treatment.
9. For more specific details on ROMAC procedures, please refer to the [Case Flow Chart](#).
10. If you want information relating to the progress of the case, please contact the Operations Director. Whilst every effort will be made to keep you informed as to progress, a follow up email every few weeks to check on progress is suggested if you don't hear anything.
11. ROMAC is run entirely by volunteers, and there is no paid staff. As all ROMAC activities are undertaken in their "spare" time, they may not be able to respond to your enquiries immediately, so your patience in this regard would be appreciated.