Aeromedical

Society of Australasia

(ASA)

Governance Framework

Version

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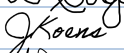
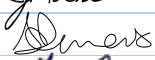
Document Approval

Name	Signed	Date
Cameron Edgar, President		08/02/2026
James Koens, President-Elect		08/02/2026
Sam Immens, Secretary		12/02/2026
Andrew Berry, Treasurer		13/2/2026

INTRODUCTION

The **Aeromedical Society of Australasia (ASA)** is a non-profit, membership-based organisation that provides a united forum for all professionals working in Australia and New Zealand's air medical transport services. The Society has represented its members since 1985; advocating for the highest standards and integrity in the provision of aeromedical services to the community. Each year the Society hosts an annual conference which brings professionals together to share and learn through oral and poster presentations, talks by world experts and informal networking between colleagues.

Mission

ASA's mission is to unite, inspire and empower the aeromedical community, enhancing patient outcomes, equitable access, aviation safety and innovation across Australia and the Pacific.

Vision

"The Voice of Australasian Aeromedicine". To be the authoritative voice and professional home for aeromedical professionals in Australasia, advocating for the needs of the industry, advancing clinical and operational standards, and fostering a sense of community and professionalism within the field.

Motto: *"Care Anywhere"*

Core Values:

Expertise through leading industry standards, championing excellence, trust, safety
Collaboration across industry and educational institutions to inspire, empower and innovate
Equity of access to aeromedical care and access to education
Care of our patients, with integrity, commitment, ethics and an outcome focus

Approval Setting:

The approval setting for authorising decisions within the *Aeromedical Society of Australasia (ASA)* is established through its incorporation in New South Wales as a not-for-profit professional association. The Society operates in accordance with its Constitution and the legislative framework governing incorporated associations, which defines the duties of directors, governance accountabilities, and fiduciary responsibilities. The ASA derives its authority from its representative role within the aeromedical and retrieval sector across Australia, New Zealand and the Pacific, exercising influence through professional leadership, collaboration, and the establishment of standards rather than through statutory power.

The Society's Aeromedical Standards provide the key reference point for promoting safety, quality, and operational consistency in aeromedical services. These standards aim to align with the *National Safety and Quality Health Service Standards* of the *Australian Commission on Safety and Quality in Health Care (ACSQHC)* and Aotearoa New Zealand Health Quality & Safety Commission (HQSC)and operate in parallel with, and subordinate to, regulatory instruments such as the *Civil Aviation Safety*

Regulations administered by the *Civil Aviation Safety Authority (CASA)*. The ASA's authorising environment is further strengthened by transparent governance processes, stakeholder engagement, and alignment with national regulatory expectations—ensuring the Society continues to operate with integrity, accountability, and professional legitimacy in advancing the aeromedical sector.

This framework was developed and is implemented by the ASA Committee with accountability to the membership via the President and executive Committee. It is subject to review at regular intervals.

Limitations of the Framework:

The ASA Governance Framework is not designed to be a single overarching governance piece, but rather part of a larger society-wide approach for assisting the core areas of business to be monitored and reported on to support decision-making and enable the core business of the ASA.

1. OBJECTIVES

The overall ASA Objects:

1. To improve all aspects of **care** of patients transported by air.
2. To provide opportunities for all those involved in air medical services in Australasia to further their **knowledge** in this field. This includes medical crew, doctors, nurses, pilots, crew, engineers and administrators, and may be by way of conference, seminars, newsletters, videos, journals or other means or medium.
3. To develop and continually review minimum **standards** of practice for air medical services. These standards cover clinical, equipment, safety and training.
4. To foster and promote **research** into all aspects of air medical services.
5. To promote communication and **relations** with international organisations involved in air medical services

2. FRAMEWORK

Governance is aimed at achieving organisational goals and objectives and can be described as *the set of responsibilities and practices, policies and procedures used to provide strategic direction, ensure objectives are achieved, manage risks and use resources responsibly and with accountability* (Source: Australian Public Service Commission. 2007. Building Better Governance. Australian Government).

This Governance Framework is designed to assure adequate accountability to our many stakeholders and to encourage performance improvement while meeting obligations and legislative requirements. It is intended that this Framework will assist ASA Committee members to understand and apply the principles of good governance, and to assess the strengths and opportunities of current governance practice and improve it.

Principles:

The framework is based on six (6) good governance principles:

1. a common sense of **purpose and direction**
2. **ASA** is functionally and structurally **aligned** to achieve its objectives
3. clear understanding of expectation in **roles and responsibilities**
4. being clear about the **responsibility and authority** of individuals and groups
5. **outcomes** are expressed in measurable terms and reported upon in an accurate, reliable and timely manner
6. **impacts** (& consequences) of good and poor performance with emphasis on recognition, learning and improving.

Mechanisms:

The mechanisms are the practices, policies, processes and documents associated with each of the principles, which are used to drive and support good governance in practice. The mechanisms and their alignment to the six governance principles are noted in the figure on page 5. Some of these mechanisms are mandatory for the Foundation, for example, because they are required under legislation, whilst others represent good practice.

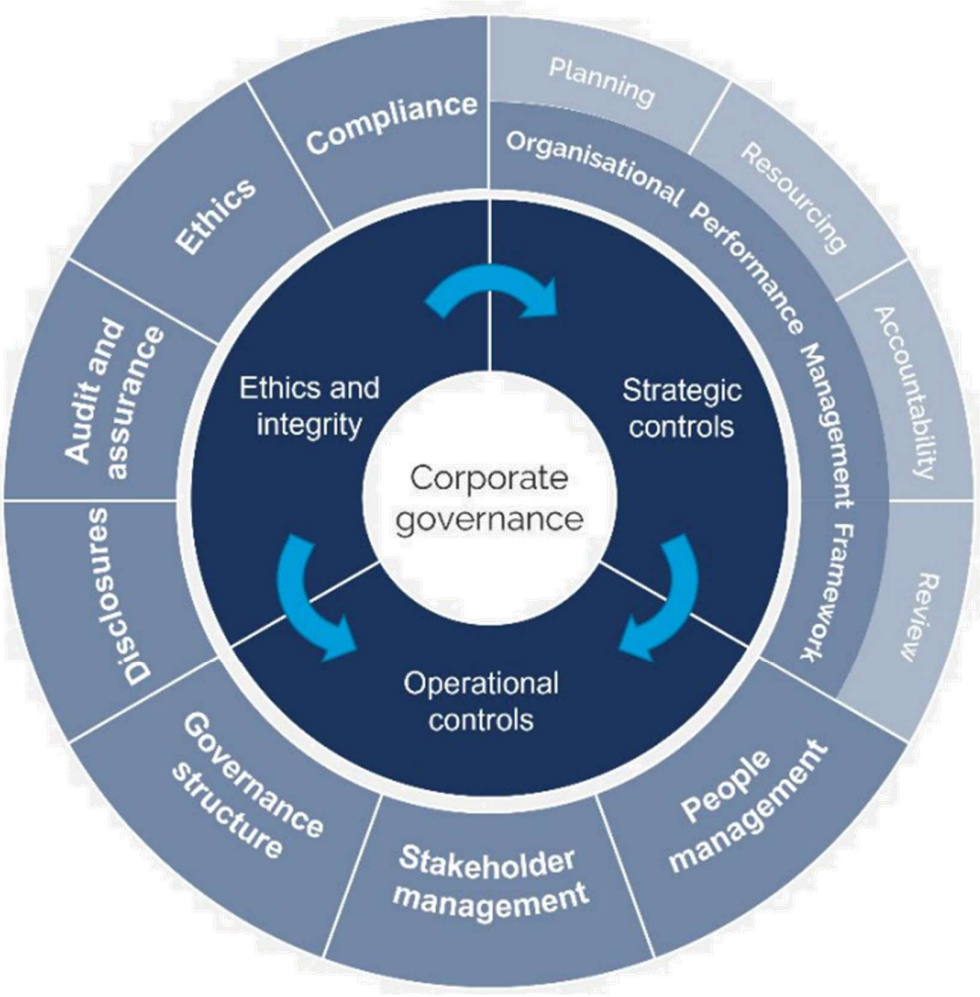


Figure 1: Corporate Governance Framework (Source: IPART NSW 2024)

Mechanisms						
	• Planning • Stakeholder Engagement • Risk Management	• Board • Organisation Structure • Committee Structure	• Position Descriptions • Code of Conduct • Probity and Ethics • Delegations • Performance Framework	• Performance Management Framework • Legislation • Committee Terms of Reference	• Annual Reports • Monitoring and Reporting • Annual Financial Statements • Patient, Family, Volunteer and Staff Experience	• Evaluation • Risk Management • Audit • Organisational Development

Table 1: Mechanics of Governance (Source: Australian Public Service Commission. 2007)

Definitions:

Governance – encompasses the system by which an organisation is controlled and operates, and the mechanisms by which it, and its people, are held to account. Ethics, risk management, compliance and administration are all elements of governance (*www.governanceinstitute.com.au*; 2021)

Accountability – accountability is the acknowledgment and assumption of responsibility for actions, outputs and decisions including the administration, governance, and implementation within the scope of the role or employment position and encompassing the obligation to report, explain and be answerable for resulting consequences. Accountability happens after.

Responsibility – responsibility is a duty, commitment or expectation to perform an action in general or if certain circumstances arise. Responsibility happens before.

Strategy – involves refining our planning and structures, specifically strategic and operational planning, defined governance and accountability systems and having defined and appropriate roles and responsibilities at all levels.

Culture – relates to leadership and integrity, demonstrated in leadership structures and behaviours, executive oversight of strategic decisions, embodiment of leadership principles, values, employee engagement and commitment to service delivery across the ASA.

Relations – refers to communication and reputation, shown in internal business partnering and external communication and relationship building, striving for a reputation for excellence, working effectively across organisational boundaries.

Performance - relates to effectiveness and efficiency, through performance monitoring , implementing evaluation systems and undertaking business process re-engineering, both at station, zone, sector, control centre and organisational level, as well as regular and mandatory performance reporting.

Compliance and Accountability – this involves meeting statutory and other obligations, through audit, delegation of authority, and having policies, processes and plans to manage finances, risk, human resources, as well as ethical, equal opportunity, occupational health and safety and record keeping obligations.

References:

Australian Public Service Commission 2007
Independent Pricing and regulatory Tribunal (NSW) 2024

Strategic Context:

The ASA operates in a dynamic aeromedical retrieval, health and aviation regulatory landscape with multiple pressures, changing expectations, and evolving technology. Key contextual factors include:

- **Increasing demand and complexity of aeromedical services**: Australia and New Zealand face growing remote, rural and very remote populations with high health inequities, long distances, and limited infrastructure. This increases both the volume of aeromedical retrievals and the complexity of cases.
- **Regulatory expectations and design standards**: There's growing pressure for consistency and outcome-focus in aviation and aeromedical design and safety standards. ASA has already identified as a key priority enhanced liaison with CASA to establish consistent regulatory and design approvals.
- **Standards, quality, safety and alignment with health system expectations**: The community, funders and regulators increasingly expect services to be safe, transparent, and evidence-based. ASA's Standards (2020) are aligned with national safety and quality health standards in Australia (NSQHSS).
- **Technology, innovation and operational change**: There's innovation in remote delivery (e.g., use of drones for medical deliveries), communications, clinical practice, and operational logistics. ASA's strategy must account for how technology can be leveraged to improve response times, safety, cost-efficiency and reach.
- **Stakeholder expectations & advocacy role**: Government, regulatory bodies, health services, clinicians, providers and communities expect ASA to play a leadership role in advocating for policy, regulatory reform, design consistency, and best practice dissemination. ASA has signalled advocacy with CASA and other stakeholders as a strategic priority.
- **Resource constraints and sustainability**: Funding, workforce capacity (including specialized clinical and aviation staff), infrastructure (aircraft, maintenance, bases, communications) are finite and under pressure. Strategic planning needs to balance high quality service delivery with sustainability and cost pressures.

Stakeholders:

The operating environment for the ASA requires consideration of the internal and external stakeholders that shape and influence its safe operations. These stakeholders may have multiple and sometimes duplicated touchpoints depending on the topic, project or action.

Stakeholders may require active involvement (being part of decision making) or more passive (notification, reference to their procedures etc). It should be safely assumed that almost all decisions and actions will require some form of stakeholder engagement.

3. Governance

a. Governance Assurance Methodology

The *Aeromedical Society of Australasia (ASA)* employs a structured governance assurance methodology to ensure accountability, regulatory alignment, and operational integrity. This methodology integrates oversight, monitoring, and continuous improvement across Society activities. The ASA Committee sets strategic direction and defines fiduciary responsibilities, while sub-elements; including Standards, Risk, and Audit—provide oversight and review. Compliance with statutory obligations, regulatory frameworks (e.g., CASA, NSQHSS), and the Society's own requirements are continuously monitored. Internal reporting, stakeholder feedback, and periodic reviews feed into a *cycle of assurance and improvement*, ensuring the Society meets its professional, regulatory, and ethical responsibilities.

Figure 3: Governance Methodology

b. Governance Structures:

Structures have been established to enable the business of the ASA on behalf of members. These structures provide for official communication, decision making and recording of business and have evolved over time. They are not static and are subject to change to continue to meet the contemporary needs of the ASA and its members.

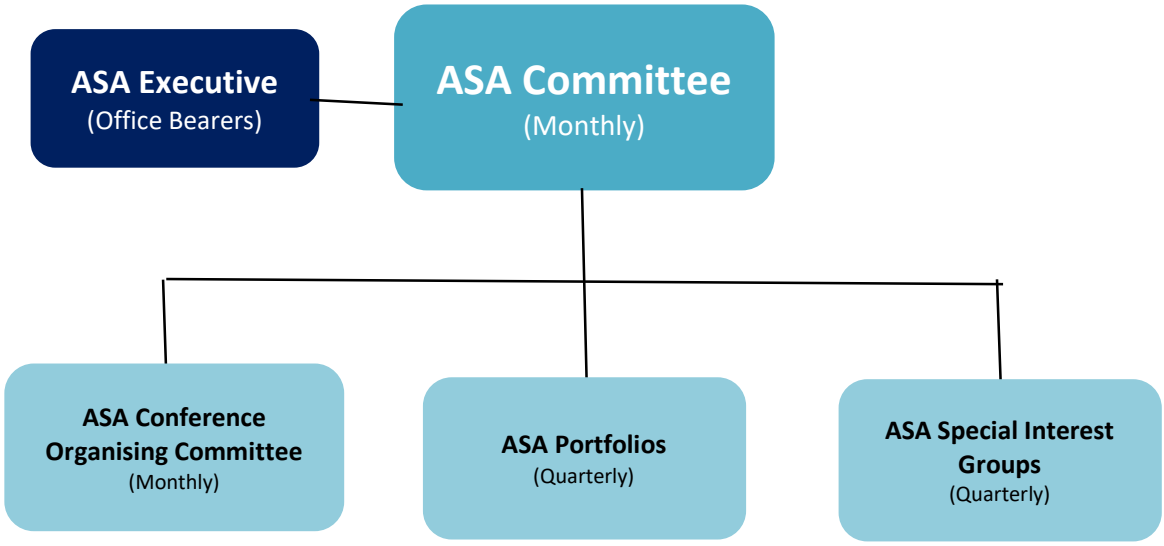


Figure 5: ASA Governance meeting structure

c. Assurance and Compliance:

The ASA Assurance Program provides the performance data and monitoring to ensure that it is meeting its requirements.

i. KPI

The ASA has a range of KPI to support good governance and the achievement of ASA goals:

- 100% compliance with all constitutional, legal, and financial reporting obligations.
- Conduct 85% of monthly Committee meetings per year with minutes and action tracking.
- Report on annual governance and outcomes to members at the AGM.
- Progress 80% of the objectives in the ASA Strategic Plan each year.
- Review the ASA Strategic Plan every five (5) years.
- Achieve annual net membership growth of at least 3%.
- Conduct one (1) member survey annually to measure satisfaction and opportunities.
- Deliver the annual Aeromedical Conference within budget and with an attendee satisfaction rate above 85%.
- Maintain a balanced annual budget and a minimum reserve equal to six (6) months of operating costs.

ii. Measurement

KPIs are predominately quantitative in design and measured typically on a monthly basis via the monthly Committee meeting.

iii. Monthly ASA Committee Minutes

A key governance tool is the monthly ASA Committee minutes and the included action items and decisions.

d. Risk Management

The ASA approaches risk management through this structured governance framework designed to safeguard its operations, members, and stakeholders. At its core, risk is managed through clear roles and responsibilities assigned to Committee members, executive leadership, standing agenda items and specialist sub-committees, ensuring accountability and oversight across strategic, operational, financial, and reputational domains. Monthly reporting, regular audits, and adherence to regulatory and ethical standards form the foundation of this framework, allowing the Society to identify, assess, and mitigate risks proactively.

Risk management at ASA is also embedded into decision-making processes, with a focus on aligning activities to the Society's strategic objectives while safeguarding patient, member, and sector interests. This systematic approach not only ensures compliance with corporate governance best practice but also fosters resilience, transparency, and confidence in the Society's capacity to deliver on its mission within the aeromedical sector.

Under its constitution, the ASA carries liability insurance to support the work of Committee members when carrying out their governance and society duties.

e. Cultural Development

Culture is the glue that holds our *ASA Governance Framework* together. The ASA actively fosters cultural development through a governance lens, recognising that a strong, positive organisational culture underpins the Society's effectiveness, reputation, and long-term sustainability. Governance structures provide oversight of cultural initiatives by embedding values, ethics, and professional standards into the Society's strategic priorities, policies, and leadership expectations. The Committee and executive leadership ensure that cultural development is not ad hoc but aligned with the ASA's mission, promoting inclusivity, collaboration, innovation, and professional excellence across all levels of the organisation.

Cultural development is reinforced through formal mechanisms such as the constitution, member engagement programs, leadership development initiatives, and regular feedback and review processes. By monitoring cultural outcomes alongside operational and strategic performance, ASA's governance framework ensures that cultural risks—such as misalignment with professional standards, inequity, or reputational harm—are identified and mitigated. This deliberate approach supports a resilient, adaptive, and values-driven culture, enhancing both member experience and the Society's capacity to contribute positively to the aeromedical sector.

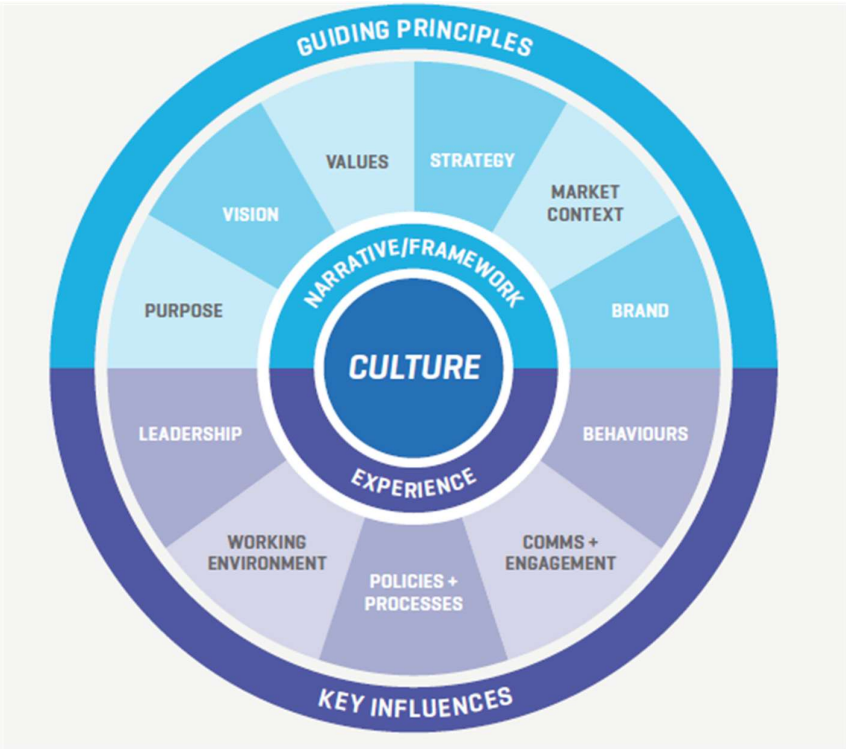


Figure 9: The Elements of Organisational Culture (Ehttps://corporateculture.co.uk/the-elements-of-culture/)

The primary aim of the *ASA Governance Framework* is to develop and maintain a positive governance culture. The ASA Committee is committed to monitoring the Governance environment and proactively guiding the policies, processes and practices that are needed to shape the culture. The ASA recognises that in order to develop a Governance culture, there is a link to creating an environment in the organisation that will influence the behaviour of committee members, which will in time shape the desired culture.