



Modern medical equipment uses less space and power, so deployed medical facilities can be as well equipped as a hospital.

MOBILIS MEDICAL



PHILLIP SMART | ADELAIDE

As Mobilis Medical's Manager of Deployable Healthcare Solutions, Peter Dyason's work includes an irony common to disaster response providers the world over.

Medics to go please

SITED in Sydney's northern suburbs, Mobilis provides the critical medical infrastructure needed to care for victims of any disaster, natural or manmade. Through a system of interconnecting quick-assembly modular shelters, any clear piece of ground with access for the average utility vehicle can become a field hospital within hours. It can expand to replicate a permanent city hospital if need be, complete with vital medical equipment and supplies, power, environment and waste control and even isolation systems to contain infectious diseases. Emergency medical staff can just walk in and start work.

"Generally what we do becomes your first strike," Dyason said. "Let's go in, assess the situation and at least be able to start triage. But it's all modularised; build this, clip it on to this. I can have a one-shelter field hospi-

tal that within the day is a 20-shelter field hospital, all fully equipped, all connected, all watertight. One day it's a car park and 48 hours later it's a fully equipped hospital."

The field of disaster response has created its own specialist technologies. Mobilis has access to shelters capable of withstanding winds of up to 160 km/h that can be erected in 10 minutes. They break down into transport bags that can be lifted by two people and fit easily in a helicopter or standard utility vehicle.

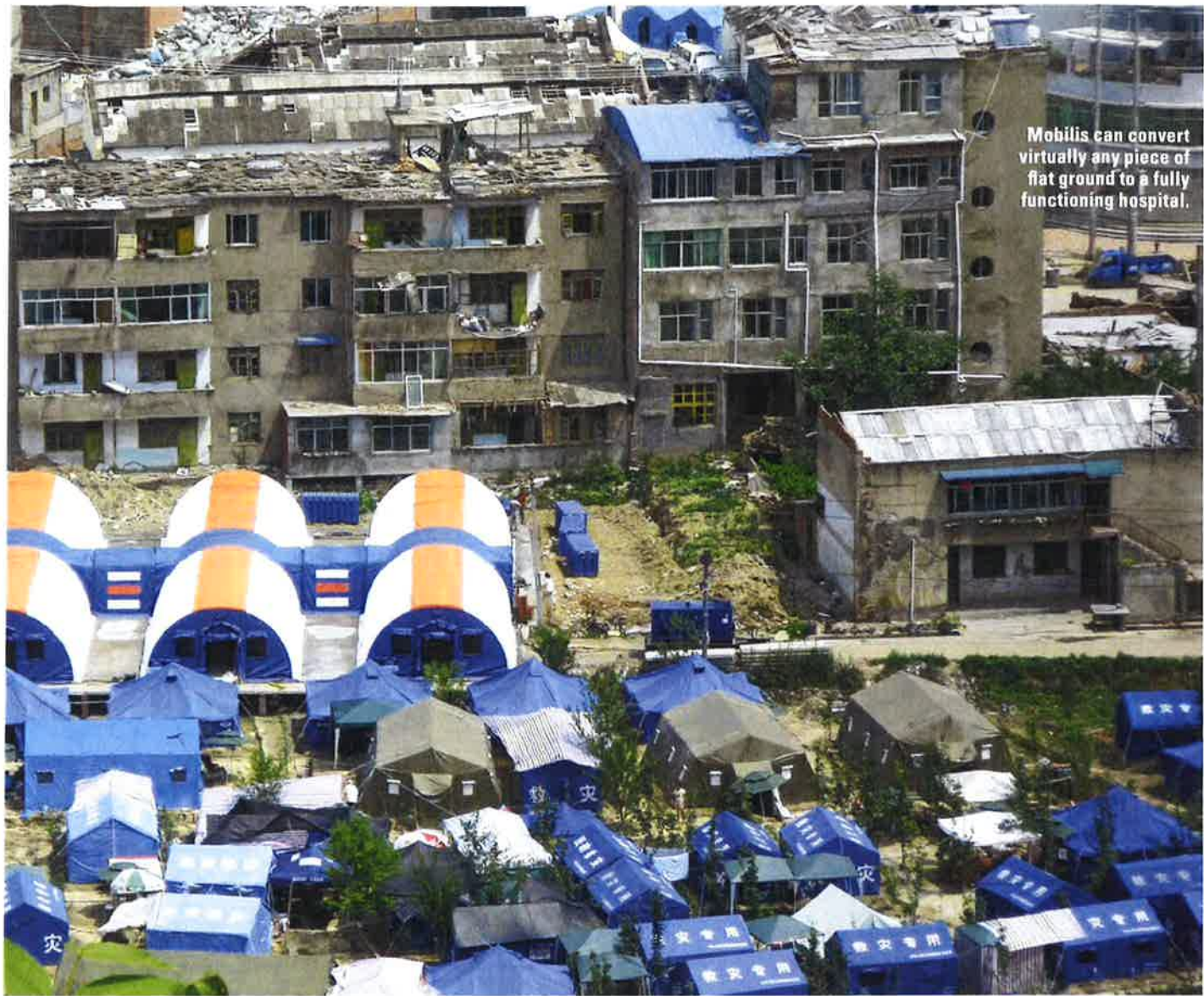
State of the art equipment includes systems for both providing clean water and dealing with waste; environmental control systems that isolate occupants to stop transfer of infectious diseases; and critical care equipment such as patient monitor/defibrillator devices that allow rescuers to monitor the vital signs of a trapped victim

remotely and transmit the data to an off-scene doctor for assessment.

One of the alliance partners of Mobilis, OPEC Systems has operated behind the scenes in some of Australia's major events. Emergency response plans for the 2000 Sydney Summer Olympics included a system for decontaminating 300 people per hour.

In 2013, Australian emergency staff deployed to the Philippines in the wake of Typhoon Haiyan took Mobilis-supplied shelters and equipment. And when the Ebola epidemic took hold in West Africa in 2014, Australian and NZ defence and civil health authorities turned to Mobilis for specialist isolation equipment to transport infected patients in any local outbreak.

A director of both Mobilis and OPEC



Mobilis can convert virtually any piece of flat ground to a fully functioning hospital.

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Systems, Connor Walsh said: “In the past OPEC Systems has provided a little individual patient transfer system which is both negative and positive pressure, so you can take a clean patient through a dirty area, or you can take a dirty patient through a clean area. Every demonstration day I’d put this little Isopod out on the bench and say ‘this is what it is’. Not one sale.

“And then suddenly the Ebola crisis came up and we had a phone call from one of the health departments here in Australia saying ‘do you still have that product?’ and we said ‘yep!’. That was a huge reach into Defence, every State and Territory health department, and the NZ Ministry of Health”.

Disaster response

Mobilis has also helped equip, train and exercise the National Critical Care and Trauma Response Centre (NCCTRC), established in Darwin to deal with regional emergencies after the Bali bombings. Mobilis helps the NCCTRC’s Australian Medical Assist Team (AUSMAT) to train for deployed op-

erations and in its annual exercises to select civilian medical staff for future overseas deployment.

As part of the potential logistic support team, Walsh has previously readied for possible deployment to the Christchurch earthquake, Cyclone Yasi in Queensland, and the Fukushima earthquake in Japan in case AUSMAT needed logistical help with its deployable shelters. None of those phone calls ever came, which was both a relief and something of a disappointment.

Mobilis is an alliance between two of Australia’s most prominent emergency medical equipment providers, OPEC Systems and Device Technologies Australia. It was originally born out of OPEC’s desire to pursue the ADF’s JP2060 project, designed to deliver a deployable health capability for the pre-

“Your purpose in life is to be prepared for disasters when they arise ... but in some ways it’s the phone call you don’t want to get.”

vention, treatment and evacuation of casualties in joint operations. “We realised that OPEC could provide the infrastructure side of things: the shelters; air conditioners; clean water storage and supply; lights; generators; and some of the internal furniture like beds,” Walsh said. “What we couldn’t supply was, to quote Monty Python, ‘the machines that go bing’.”

A business development manager’s research into potential business partners resulted in one of those coincidences that are the stuff of business legend. The name at the top of the list turned out to be vaguely familiar.

“Lo and behold, around the corner from us in Frenchs Forest in Sydney, was a company called Device Technologies that I used to drive past every day and had no idea what they did, or that they were that big.”

Founded in 1992, Device Technologies was already an established Australian-owned distributor of advanced medical equipment and consumables, employing around 700 healthcare specialists and support staff in Australia and NZ. Initial talks identified an ideal fit; complementary products and expertise and a national footprint of offices and warehousing. Mobilis was formed as a joint venture that could be ready for JP2060, but also take advantage of any relevant opportunities along the way.

JP2060 has literally been running for 20 years, but with this year’s Defence Integrated Investment Program allocating between \$750 million and \$1 billion to “Deployable Health Capability” between 2016 and 2025, a request for tender may be looming below the horizon.

Mobilis understands it will be up against some prominent international competi-



Sophisticated medical equipment is packaged to stand the rigours of transport in to remote areas.

tion for such a large project, but Dyason believes the partnership has the edge, with Australian ownership, trained specialists in everything from defibrillators to advanced operating theatre systems, and a flat management structure that ensures personnel called in to examine a customer problem have the authority to solve it on the spot.

“Particularly with Defence, if something goes pear-shaped they don’t want to wait for a decision-maker to come in from overseas to resolve the problem,” he said. “They want to be able to say ‘I need one of your directors in Canberra, tomorrow’. Not only will we be in Canberra tomorrow, but we’ll be able to make a decision that same day.”

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