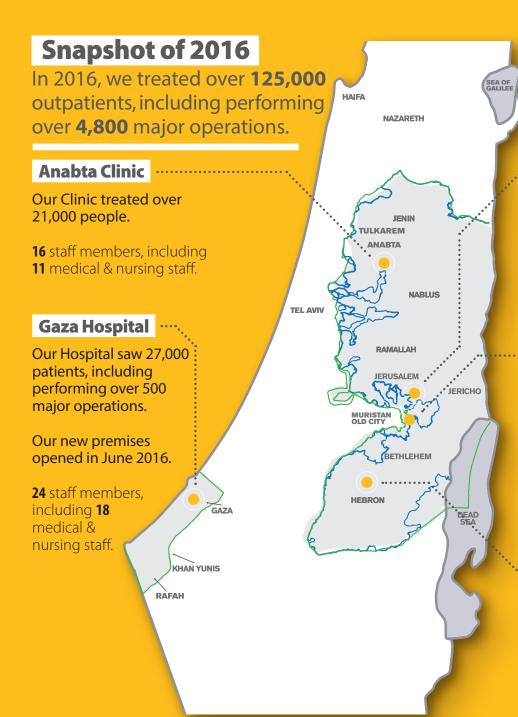




Trustees' Annual Report 2016

Saving **Changing**Sight **Lives**



Community Outreach Programmes:

The **Mobile Outreach Programme's** impact
continues to grow. In 2016,
the Programme saw over
18,000 patients, compared
to 16,700 in 2015.

Diabetic Retinopathy Screening Programme saw

over 47,200 patients between 2012-2016 in the West Bank, of these almost 12,400 were referred for treatment.

We assisted UNRWA with a similar service in refugee camps in Jordan in 2016 in which over 2,700 diabetic patients were screened for diabetic retinopathy.

Jerusalem Hospital

Our Hospital treated over 42,100, patients including performing nearly 3,800 major operations.

180 staff members, including **108** medical & nursing staff.

Muristan Clinic

The Muristan Clinic, operated jointly with Sovereign Military Order of Malta, opened in October 2016, and we hope it will treat over 5,500 patients annually. Alongside the Clinic we have established a Peace Garden, the Tree of Hope and a Museum.

Hebron Hospital

Our Hospital treated over 13,600 patients in 2016, including performing over 500 major operations.

Our new premises, opened in November 2015, have allowed us to see nearly 20% more patients and perform over 50% more major surgeries in its first year of operation.

14 staff members, including **9** medical & nursing staff.



Staff numbers are as at 31 December 2016 and do not include the 6 staff members in our London Fundraising Team.



Contents

Eye Hospital Group

- 4 Highlights of 2016
- Plans for 2017
- 6 Chairman and Chief Executive Introduction
- 8 **About SJEHG: Patients**
- 9 Case Study: Yazan
- 10 About SJEHG: Our People
- 12 Case Study: Dr Iyad Habil
- **About SJEHG: Partnerships** 13
- 14 About SJEHG: Muristan
- St John Family Around the World 16
- Regular Giver Ambassador: Patricia Mantoura
- 19 **Public Benefit**
- 20 Strategic Report, Strategic Plan 2017-2020
- Strategic Report, Financial Review 2016 21
- **Trustees and Committee Members** 24
- **Governance Structure** 26
- Statement of Trustees' Responsibilities
- **Independent Auditors' Report to the members** of St John of Jerusalem Eye Hospital Group
- **SJEHG Financial Statements** 30
- **Professional Advisers & Administrative Information** 45
- 46 Thank You

Statement of Financial Activities

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Incoming Resources: ±10.8M	£000	\$000	%
Patient Related Income	4,416	6,006	41
Priory Income for Capital Costs Operational Costs	398 2,488	541 3,329	4 23
Other Voluntary Income for Capital Costs Operational Costs	725 2,680	986 3,645	7 25
Investment Income	144	196	1
Total	10,811	14,703	
Resources Expended: £9.8m	£000	\$000	%
Charitable Activities	8,947	12,168	92
Cost of Generating Funds	692	941	7
Governance	111	151	1
Total	9,750	13,260	

Aims of the Charity

Saving Sight Changing Lives

St John of Jerusalem Eye Hospital Group is the only charitable provider of expert eve care in East Jerusalem, Gaza and the West Bank. We have been treating patients in the region regardless of their ethnicity, religion or ability to pay for over 135 years. Our sight-saving work is carried out against challenging and difficult odds to the highest international standards.

Our Impact extends beyond the Individual

We contribute to economic growth in the region, enhance education and employment prospects, all through the services provided by our Hospitals, Clinics and Outreach Programme.

Glossary:

CBM – Christoffel-Blindenmission. **EU** – European Union. **JCI** - Joint Commission International; the gold-standard for healthcare worldwide. NGO - nongovernmental organisation. NIS - New Israeli Shekel. oPt occupied Palestinian territories. PA - Palestinian Authority. **SJEHG** - St John of Jerusalem Eye Hospital Group; this refers to all of our entities. **UNDP** - United Nations Development Programme. **UNRWA** - United Nations Relief and Works Agency, the UN branch responsible for Palestinian refugees. **USAID** - United States Agency for International Development

St John of Jerusalem Eye Hospital Group Company no: 7355619 Charity no: 1139527 Registered Office: 4 Charterhouse Mews, London, EC1M 6BB

Highlights of 2016

Our ambitious Plans for 2016 are reflected in our Highlights of this year.



Patients

 In 2016, we treated over 125,000 outpatients including performing over 4,800 major operations (for an analysis of patients treated see the Snapshot on page 2).



Quality of Care

- JCI accreditation is considered the gold standard in international healthcare systems. SJEHG had its threeyear review in April 2016, with reaccreditation achieved, notwithstanding the much higher benchmarks.
- SJEHG outperformed all international benchmarks in infection control for all ophthalmic procedures, including cataract surgery, and hospital acquired infections, in all clinical sites.



Professional Development

 2 residents graduated from the Medical Residency Programme, 3 residents continued their studies.

- 7 nurses enrolled and 6 nurses graduated from the postgraduate training programme at our Sir Stephen Miller School of Nursing.
- 15 nurses graduated from our Gaza Nurse Training Programme.
- One doctor began a Fellowship in Ophthalmic Genetics and Retinal Diseases in partnership with Hadassah Medical Center.
- One doctor began a Fellowship in Glaucoma and one nurse completed an advanced Oculoplastic course at the Aravind Institute in India.



Modernisation

 Hospital Management Information System (the digitalisation of our hospital patient records): the initial stages of implementation were successful across all our locations and patient services.



Infrastructure

 The official opening of our new Hebron Hospital was in September 2016, although it began treating patients in November 2015. Its first year of service saw a nearly 20% increase in outpatients and 50% increase in major surgeries performed.

- The new state-of-the-art Gaza Hospital opened in June 2016. It has seen new surgeries available within the Gaza Strip for the first time, such as corneal transplants.
- The Muristan Clinic opened in October 2016.
- The adjacent Muristan Garden of Peace, Tree of Hope and Museum were also opened to the public and will inform locals and tourists of our history in the area as well as promoting SJEHG as a centre for peace.



Research

 Our Peace in Sight (Genetic Research Programme) was established in Jerusalem in 2016 in partnership with the Hadassah Medical Center and the EU Partnership for Peace Programme. Its research into genetic eye conditions will help us develop better treatment for the conditions which are most prevalent in Palestine.



Media

 The documentary 'Eyes of St John', produced by Carlo Nero and Vanessa Redgrave, has continued to allow us to showcase our work to our supporters and new audiences. It has won three prestigious awards and was a finalist in the London Short Film Festival 2016.

Plans for 2017



Finance

 The Brexit effect has hit SJEHG hard, due to the devaluation of the Pound Sterling and the weakened exchange rate with the Shekel in which we pay for most of our costs. Consequently we will, more than ever, focus on raising vital funds for our sight-saving work in countries unaffected by Brexit.



Clinical Capacity

- The establishment of a corneal laser refractive surgery suite allowing us to perform laser eye surgery.
 This will be on a noncharitable basis to enhance our local revenue base.
- Corneal transplant services will be brought to Gaza.
- Muristan Clinic operating for its first full year.



Outreach

 Our very successful West Bank Diabetic Retinopathy Screening Programme will be taken to refugee camps in the Gaza Strip.



Research

 It is intended that articles based on our new Research Unit's study into genetic eye conditions will be published in recognised journals.



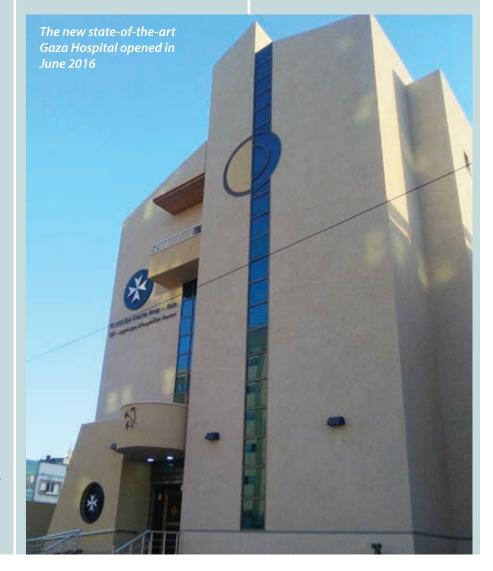
Muristan

 Complete the renovation of the Garden of Peace in order to maximise its potential.



Personal Training and Development

- One doctor will complete his training for a Fellowship in Glaucoma at the Aravind Institute in India, enabling our Gaza Hospital to begin providing treatment for the most complicated glaucoma cases.
- One doctor will graduate, two will continue and two will begin their training on our Medical Residency Programme.
- Seven nurses will graduate from the Sir Stephen Miller School of Nursing.



Chairman and Chief Executive Introduction

2016 has been an extraordinary year in the history of St John of Jerusalem Eye Hospital Group

Last year we stated

"our overarching aim is to deliver the highest standards of patient care, with the most efficient approach possible." Our major achievements of this year are all focused on that goal.

Our commitment to Gaza has been reinforced, with the opening of our new hospital in June 2016. The hospital has a much greater capacity than the clinic (opened in 1992) and its state-of-the-art facilities allow SJEHG to reach more patients in what is the most vulnerable area in which we operate. We are already seeing the benefits to patients in Gaza. In January 2017, SJEHG was able to carry out corneal transplants for the first time at our Gaza Hospital.

2016 also saw the official opening of our new hospital in the centre of Hebron, which was attended by a substantial number of St John international friends. As the hospital has been operational since November 2015, we have been able to monitor the impact the new premises have had on our patient numbers, and are pleased to report an increase in outpatients by nearly 20% and an increase in major surgeries by 50%.

Our Muristan site in the Old City of Jerusalem was successfully restored and the Clinic (operated jointly with the Sovereign Military Order of Malta (SMOM)) opened in October 2016 and

expects to see over 5,500 patients annually. Vital support from the Welfare Association, SMOM, and Dr Michael and Dr Amira Dan made the restoration possible. SMOM's commitment for the future with us is most welcome. The site is of particular significance to SJEHG as it is where St John began as a 12th century hospital on the site of an 8th century Islamic hospital. We have also restored the adjacent Museum and created the Peace Garden with its iconic Tree of Hope, which is featured on page 14. We are hoping that this will become an internationally recognised feature for the annual 3.5 million tourists to the Old City informing them of the history and work of SJEHG and the Order of St John.

We continued the development of our flagship Jerusalem Hospital, which is now more than 50 years old, to ensure that it is fit for purpose in the 21st century. Our visible patient pathways have been fully implemented to aid our visually impaired (and sometimes illiterate) patients to find their way to the correct clinics. Additionally, supported by USAID, our new electronic patient record system (also known as the HMIS) went live in October. We were also delighted that our JCI accreditation (the gold standard for healthcare systems worldwide) was renewed during the year for a further three years, notwithstanding the higher benchmarks to be met for reaccreditation.

Our genetic research programme based in our Jerusalem Hospital, 'Peace in Sight', which is funded by the European Union and undertaken in collaboration with the Israeli Hadassah Medical Center, is now well underway. One doctor is continuing his training in hereditary genetic eye conditions at Hadassah, and another has set up a Retinal Dystrophy Clinic at SJEHG. We have begun to recruit Palestinian families who have the relevant hereditary conditions to take part in our study. We are hoping that by the end of 2017 we will be in a position to publish some of our findings in internationally recognised healthcare journals, as we aspire to be a centre of excellence in ophthalmology with a research arm.

The transition to the three new facilities caused some expected temporary dislocation of patient services but our total numbers of 125,000 patients, including 4,800 major surgeries, compares favourably with the previous year's 128,000 patients including 5,000 major surgeries. We expect to see an increase in patient numbers in 2017, as we did after our Jerusalem Hospital surgery refurbishments in 2014/15.

Progress continues on a number of other fronts, notably in our Mobile Outreach Programme which has seen patient numbers increase for the second year in a row – up from 16,700 in 2015



to over 18,000 in 2016. We plan to expand this further in 2017 by bringing our mobile services to the Gaza Strip. We also seconded some nurses to work with UNRWA in Jordan on its humanitarian work in support of Palestinian and Syrian refugees. This is the first time our services have been projected into a neighbouring country.

We are grateful for funding from USAID's American Schools and Hospitals Abroad Program (ASHA) and the Linbury Trust which will enable us to introduce our new corneal suite for refractive surgery. This kind of surgery is typically regarded as 'desirable' surgery as opposed to 'essential' surgery. It will allow us to charge private patients for the service and consequently to generate

additional valuable income at a time when it is sorely needed.

Unfortunately 2016 had other events, most notably Brexit, which caused a sharp depreciation in the Pound Sterling against all currencies, including the Shekel. The unwelcome consequence is that Brexit will cost SJEHG £1 million a year as Pound Sterling donations buy 20% fewer Shekels. Our budget for 2017 shows a £1.5 million deficit and is set at a £/Shekel rate of NIS 4.8 = £1 compared to NIS 5.85 =£1 in 2016 and is the lowest rate in SJEHG's history. In addition, the mandatory increase in the Israeli minimum wage in three phases is also causing increases in our largest cost, namely our personnel. While the budget does include £1 million of depreciation (due to the

infrastructure enhancements), this is a worrying position that requires action on a number of fronts to bring the budget back into balance.

We therefore continue to be dependent upon our donors around the world. Many are listed on page 46 and we thank them all on behalf of the patients we serve. Without their generosity our much needed services would have difficulty operating at their current levels.

The world around us changes very fast. While we endeavour to be nimble and react to it, this is not always easy. But with everyone's continued help we can aspire to deliver the highest standards of patient care to those we are committed to serve. Saving Sight, Changing Lives.

Ni Iholas Worsy

Nicholas Woolf Chairman

10d-6hm

Brigadier Tom Ogilvie-Graham Chief Executive



Our Patients

Our **Jerusalem Hospital** has been operating for over 135 years. It has a large, modern outpatients department, specialist retinal, corneal, orthoptic and paediatric units, operating theatres and 24-hour emergency services. We were the first hospital operating in the oPt to receive JCI accreditation.

The West Bank is subject to a system of movement restrictions, including the Separation Wall, permit system, settler-only roads, and many checkpoints. We have had to expand our services to be accessible to as many residents of the West Bank as possible, especially as 20% of patients (and their companions) from the West Bank are denied permits to enter Jerusalem.

Our new **Hebron Hospital**, in a more central location than its predecessor, is a vital source of eye care in an area that is particularly affected by the movement restrictions in the West Bank. The hospital provides sight-saving treatments such as cataract surgery, and serves the 640,000 people who live in and around Hebron, including the seminomadic Bedouins.

Our **Anabta Clinic** is accessible to the 1 million residents in Anabta and surrounding towns such as Nablus and Jenin. Those living in the area are amongst the poorest in the oPt.

Our new state-of-the art **Gaza Hospital**, replacing our

previous clinic, has greatly expanded our capacity to treat the population of the Gaza Strip. Over 1.8 million Palestinians live in isolation in the Gaza Strip, one of the most heavily populated areas in the world.

In July 2016 over 30% of patients from Gaza were denied or delayed access to the West Bank to receive medical care (WHO). This serves as a reminder of the need for

communities in the West Bank, and serves a population of 2.9 million people. The team coordinates permits needed for patients with complex eye issues to be referred to one of our hospitals or clinics.

Our **Diabetic Retinopathy Screening Programme** screens and treats this condition common among patients in the West Bank. The initial four-year project in the West Bank, which ended in 2016,



SJEHG's services within the Gaza Strip.

Our Muristan Clinic opened in 2016 and is located in the heart of the Old City, and on the site of the original Crusader hospital from where our charity's history originates. Adjacent to the Clinic is our new Peace Garden and Museum which will allow us to encourage visitors to the Old City of Jerusalem (3.5 million a year) to gain awareness of the work of SJEHG.

Our Mobile Outreach **Programme** delivers essential eye care to some of the most remote and impoverished

was a great success. Based on worrying findings from the programme (namely a much higher prevalence of Diabetic Retinopathy than expected), SJEHG is working with the Palestinian Ministry of Health to integrate the screening into the national health programme. We plan to expand our screening programme into the Gaza Strip in 2017.

In 2016, we also seconded some of our nurses to work with UNRWA in Jordan where they have implemented the Screening Programme in refugee camps supporting Palestinian and Syrian refugees.

Case Study: Yazan

Yazan from Gaza recently received treatment at our Jerusalem Hospital for injuries sustained from playing in the rubble of his house – rubble caused by the 2014 conflict in Gaza.

The injuries he received were severe, as his father explains: 'When I first saw him I thought he had died. It looked like he wasn't breathing.'

He was rushed to a local hospital and had an emergency operation in an attempt to save his eye. However, the operation was not a success, and the eye remained almost fully closed, offering Yazan limited vision.

His parents decided they must take him to seek treatment elsewhere. But this in itself caused a problem. Yazan's father was denied access to the West Bank, like many in the region, and his mother was breastfeeding their newborn baby.

How do you seek treatment elsewhere when you are not allowed to leave the area you live in? One third of all patients (and their companions) from Gaza are denied or delayed access to the West Bank to seek medical treatment. Our Gaza Hospital was created for this exact reason – to enable our most isolated patients to be able to easily access healthcare.

However, Yazan's case was a particularly complicated one, as the injury was so severe



- and the majority of our specialist surgeons are based in our flagship Jerusalem Hospital. It fell to little Yazan's grandmother, with the help of St John social services, to travel with him to Jerusalem for treatment.

Two operations at St John saved Yazan's sight in the damaged eye. His grandmother is very thankful to have found our services:

'I thank God when I think about how things were and how things are now. There is nothing like being able to see, vision, what's more than that?'

In a society as turbulent as the oPt, children living without sight struggle to access

education and therefore gain employment later in life. Living blind or visually impaired robs them of an independent future - by investing more into our services we are able to increase the number of children we see and treat, helping to ensure that no child in the oPt suffers from preventable blindness.

Yazan is one of the 42,700 children we screened or treated at St John Eye Hospital in 2016. He is featured in an online video story which you can watch at www.stjohneyehospital.org /yazans-story

Our supporters help to give children like Yazan a chance for an independent future.







Our People - SJEHG employs 240 people in total, of whom



We invest in training our local staff. In doing so, we are contributing to the Palestinian economy.

The **Medical Residency Programme** invests in Palestinian doctors and enhances their ability to provide essential sight-saving skills for the Palestinian population. There is nowhere other than our Jerusalem Hospital that offers such comprehensive training for Palestinian ophthalmologists in the oPt. Over the past 10 years, in line with our vision of providing a sustainable service of excellence to the

people we serve, Palestinian ophthalmologists have continuously received specialist training. SJEHG now has Palestinian specialists in every field of ophthalmology, except complex oncology. In the past, these services would have been provided by visiting expatriate specialists. These visits were often staggered or ad hoc which could lead to long delays in patients receiving urgent care - especially in times of conflict. Our specialists can now treat eye problems across the board, meaning our patients can be treated to an expert level as soon as possible.

Once qualified, our doctors

can specialise in a particular area of ophthalmology by undertaking a fellowship in our Jerusalem Hospital or elsewhere. Our Joint Teaching Programme, in partnership with the Israeli Hadassah Medical Center, is where many of our doctors undertake their training. This partnership allows our doctors to access teaching that is not available to them in the oPt; as well as encouraging constructive relationships between Israelis and Palestinians. SJEHG won the The Gandhi Foundation International Peace Award 2012 in recognition of our medical peace-building. In February 2016, our Peace in Sight (Genetic Research



146 are medical staff, including **24** doctors and **94** nurses.*



Programme) was set up in collaboration with Hadassah Medical Center and funded primarily by the EU Partnership for Peace Programme. As well as setting an example of working cooperatively through humanitarian work, this research unit will help us improve our treatment of genetic eye diseases in the oPt and wider region and increase our profile as a leading centre for ophthalmic care and research.

Our highly-regarded **Sir Stephen Miller School of Nursing** offers up to ten places on the Specialist
Ophthalmic Nursing Course every year and is accredited

by the University of West London. Many local nurses who undertake the course become SJEHG employees. Over the past 20 years we have trained over 200 nurses, some of whom have gone on to become our Nursing Director, Theatre Coordinator, Muristan Coordinator, Mobile Outreach Coordinator and Sir Stephen Miller Nursing School Senior Lecturer.

We have also launched our **Gaza Nurse Training Programme**, which runs every two years. By providing education opportunities in Gaza we are creating opportunities for those who are the most affected by

movement restrictions, as well as ensuring we have a well-staffed medical team providing care for our Gazan patients.

By developing our infrastructure and continuing our training, we are enabling our satellite hospitals and clinics to increase the level of service available locally, which reduces the numbers of Palestinians having to negotiate the complex permit systems to receive treatment.

*Staff numbers as at 31 December 2016.



Case Study: **Dr Iyad Habil**

"Politics do not matter when it comes to medicine."

Dr Iyad Habil is our Cornea Specialist based at our flagship Jerusalem Hospital.

All of his training in ophthalmology was achieved through our Medical Residency and Joint Teaching Programmes. From political activist to top ophthalmic surgeon Dr Iyad has an interesting story to tell, and at its heart is SJEHG.

"I was born and grew up on the Gaza Strip, my family are Palestinian refugees. I was seventeen during the first Intifada, 1987, I became involved in activism and ended up in jail for six months. When I got out I wanted the opportunity to really help people, so I decided to study medicine, and later I chose ophthalmology as it is a field that can really make a difference.

I obtained my medical degree in Moscow and then I continued my career in Jerusalem, with St John Eye Hospital. A lot of my training took place under the Joint Training Programme that SJEHG has with the Hadassah Medical Center (the Israeli University Hospital). In my training I had to deal with patients from both the Israeli and Palestinian sides. Politics do not matter when it comes to medicine.

I love my job. An average day for me begins with giving a lecture or seminar with the

resident doctors. Then I go to clinic where I will provide diagnosis and treatment, and talk to the patients through their treatments. Twice a week my days are spent in the theatre where I perform either cataract surgeries or corneal transplantation when donated corneas are available. The technology these days is incredible – on a good day I will perform over ten cataract surgeries. That is ten patients walking away that day with better vision.

There have been so many incredible patient stories throughout the years but there is one that I will always remember. A seventy-year-old female patient with a history of glaucoma in both eyes presented to the hospital with extremely poor vision. She couldn't see anything except the wave of a hand in front of the eye, she was unable to walk alone and could no longer recognise the faces of her loved ones.

Her eyes were in a bad state - an examination showed controlled intraocular pressure and small

non-dilating pupils due to papillary membranes and white cataracts. I performed cataract surgery with intraocular lens implantation in both eyes. The surgery was extremely challenging due to the nature of her condition, and I was incredibly relieved when it was completed with no further surgical complications.

The effort was all worthwhile when I met with her again for her follow-up. The first thing she said to me was 'now I can see the doctor who gave me sight!'

It was a very emotional moment and it taught me to never give up, no matter how difficult the case may be.

I am so thankful to St John, for my own personal training but also on behalf of the wider community. If St John did not exist there would be many more blind people in the oPt, and many less ophthalmologists."

Dr Iyad Habil is not yet sponsored. If you would like to support Dr Iyad or any of our other staff members please get in touch.



Partnerships

SJEHG enjoys partnerships with a variety of organisations which offer joint services alongside vital funding.

We have a rich history with the Sovereign Military Order of Malta (SMOM) and our partnership continues to this day. SJEHG offers a programme to screen premature babies in the Caritas Baby Hospital and the Holy Family Hospital both of which are run by SMOM. Our new Muristan Clinic is operating in partnership with SMOM.

Our Joint Teaching Programme and our Peace in Sight (Genetic



Association (SOA) was established by SJEHG Trustee David Verity. This organisation aims to strengthen ties between SJEHG and medical, nursing and allied professional colleagues associated with St John Priories globally and, in particular, Moorfields Eye Hospital, London.

States Agency for International Development (USAID).

The United Nations
Development Programme
(UNDP) deserves a special
mention as in 2015 and 2016
it significantly helped us by
facilitating importation of
building materials into Gaza.
This was integral in successfully
opening our new Gaza Hospital
in 2016, the first significant
build completed there since
2014.

The World Health Organization (WHO) is considered the national health technical advisor, supporting the health sector in Palestine including the services operated by SJEHG. We are also considered the main referral centre for ophthalmic conditions for the Palestinian Ministry of Health.

The London-based St John Guild, St John Ophthalmic Association and the Jerusalembased Friends of St John Society are technically organised as sub-committees of the Fundraising Committee and accordingly fit into our governance structure.



Research Programme) would not be possible without the collaboration with other ophthalmic centres of excellence, most notably the Hadassah Medical Center (Israel), Moorfields Eye Hospital (United Kingdom) and the Aravind Institute (India).

In 2016, our St John Ophthalmic

There are a number of other development organisations in the oPt who operate in partnership with SJEHG to offer our sight-saving services, most notably The United Nations Relief and Works Agency for Palestine Refugees in the Near East (UNRWA), Medical Aid for Palestinians and The United



Muristan - Restoring our historic site in the Old City of Jerusalem

Our new Muristan Clinic and Peace Garden are a symbol of the Order of St John's history as the site is where our story began over a thousand years ago.

We are extremely proud to have made a visible return to this revered site in 2016.

Mark Coreth, the worldrenowned sculptor who designed our iconic Tree of Hope, which takes centre stage in our new Peace Garden, explains its significance:

"The Muristan is situated almost in the bullseye of the Old City of Jerusalem where the four Quarters meet and will include the newly opened eye clinic, which will serve people of all nations and all religions. The area has a long medical history from about 700 AD. The Order of St John takes its name from the Church of St John situated just a few metres to the south. The clinic and garden are very close to the Holy Sepulchre,

the Al Aqsa Mosque, the Dome of the Rock and the Western Wall of the Temple. In other words it is in the very centre of the religious world."

Muristan Clinic

SJEHG has recently fully restored the Muristan to be a working walk-in clinic, in collaboration with the Welfare Association's Old City of Jerusalem Revitalization Programme - Taawon. The Clinic will be operated in partnership with the Sovereign Military Order of Malta. It is expected to see approximately 5,500 patients a year. Complex cases will be referred to SJEHG's flagship hospital in East Jerusalem, where patients will receive advanced care. The clinic will provide easy access to eye care (where early detection typically is key in saving sight) to the Old City's thousands of inhabitants.

The Clinic opened its doors on International World Sight Day -October 13th 2016. We are very excited to see where this new venture will take us, none of us

more so than local resident of the Old City Marlene Katanasho, who has been promoted from Staff Nurse in our Jerusalem Hospital to manage the Muristan Clinic. She has said of the new venture:

"I come from the Old City, so I am now helping to treat my friends and neighbours. People living here so appreciate having the clinic so close to their homes, shops and schools and many have complimented me on the beautiful transformation the building has undergone in the past year."

Muristan Peace Garden

The wonderful consequence of the Muristan Clinic renovation is the creation of the opportunity to encourage international visitors to the Old City of Jerusalem (3.5 million a year) to gain awareness of the work of the Eye Hospital and the Order of St John generally. What is





missing from the Old City is a space to escape the masses, in an area where 700,000 people live in one square kilometre. Our new Peace Garden and Museum will hopefully offer some peace and tranquillity in the midst of the tumult, whilst also serving as a means to educate unsuspecting tourists on the great work and history of St John.

The garden also includes a new bronze sculpture - The Tree of Hope - by Mark Coreth, which is an olive tree with a canopy of swifts, migrating birds which are native to the Old City. In his own words, Mark describes the tree as 'a symbol of hope for a region that desperately needs it', and we are hoping that these swifts will go on to become a symbol of SJEHG worldwide. Three swifts have been placed on SJEHG premises across the oPt as a symbol of the hope our services offer to the people of Palestine, and

the three faiths that hold this area in such high significance. Mark Coreth has also produced miniature swift sculptures, available for purchase at www. stjohneyehospital.org, creating funds to be directed back into our sight-saving work.

Dr Michael Dan, who together with his wife Dr Amira Dan, provided lead funding for the project, succinctly summarises the sentiments behind our new venture:

"The opportunity to rebuild a thousand year-old medical clinic in Jerusalem, on its original site, according to the original vision of its founders, is a rare privilege indeed.

For over a thousand years, the Order of St John has cared for the sick and the poor, with sensitivity and with compassion, without regard to ethnicity, religion, or political ideology. These are eternal

human values that can be found in every great religion of the world, and also in modern secular society. The rebuilding of this clinic, according to these principles, using literally the same stones as a thousand years ago, bears witness to the indestructible nature of human compassion.

Health and peace go hand in hand, which is why we have a Peace Garden right next door to this Eye Clinic. When we close the gaps in what are called the social determinants of health (income, education, employment, social status, and poverty), we build a foundation for peace. When we bring the best eye care in the world to the people of Jerusalem who might not otherwise have access to an eye clinic, we build peace in this city of peace. And when we bring peace to Jerusalem we bring peace to the entire world."

St John Family around the World

The Priories of the Order of St John and St John national offices have a phenomenal impact on the work of SJEHG.

In 2016, the St John Family made up almost 50% of the overall voluntary income for the year with an incredible £2,886,000 in donations. A special thank you must be made to the Priory of the USA which made up 61% of our St John Family funding in 2016. Without this support we would struggle to continue our vital sight-saving work in the oPt.



Dr Humam Rishmawi is our Consultant Paediatric and Neuro-Ophthalmology Specialist.

His journey in ophthalmology started at St John Eye Hospital in 1993 as a Medical Resident. His loyalty to the work and mission of St John propelled him to pursue a specialisation in paediatrics that would better equip him to serve his people as about 40% of

Canada:Sponsored the salary of our Paediatric and Neuro-Ophthalmology Specialist.

Canadian Dr Michael Dan and his wife Dr Amira Dan provided the lead funding for the Muristan Peace Garden Project.



United States: Funded two years support (2017-2018) for one of our Mobile Outreach vans. Part-funded our Medical Residency Programme, Nursing Training, Gaza Hospital costs, various vital equipment and surgery costs as well as general unrestricted funding across our services where it is most needed.

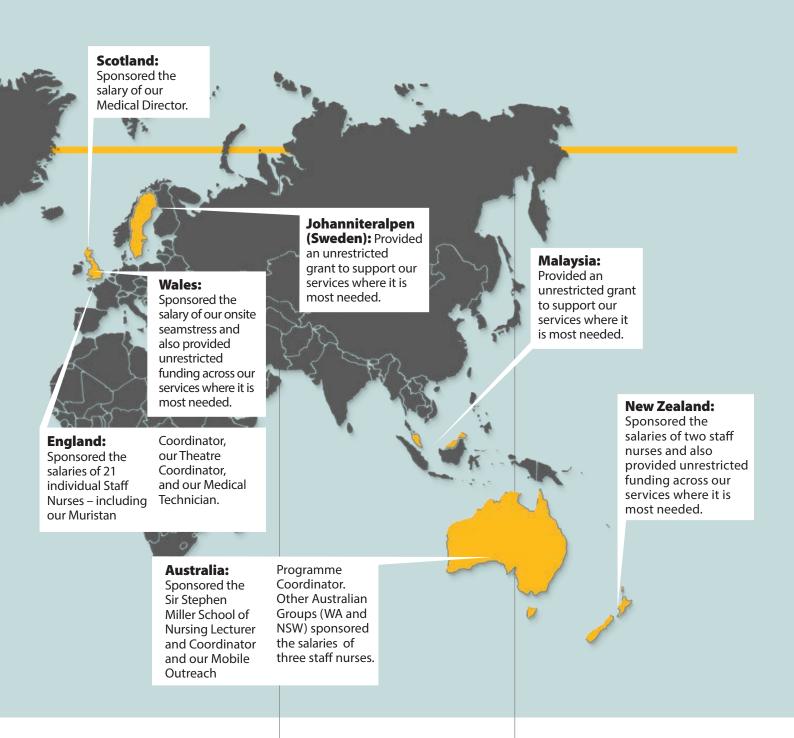
St John Family Funding 2016:

	£000	\$000
USA	1,761	2,395
England	407	554
Canada	242	329
Australia	145	197
New Zealand	139	189
Scotland	112	152
Wales	40	54
Malaysia	21	29
Sweden	19	26
Total	2,886	3,925

the population of the oPt are children and they make up over one third of our cases.

Dr Humam is a wonderful example of the impact that the support of the different Priories of the Order of St John has on the work of the eye hospital in the Holy Land. His early training in the UK was sponsored by the Priory of Wales and his subspecialty fellowship later on, in strabismus and neuro-ophthalmology, was sponsored

by the Priory of Scotland. In 2015, the Priory of the United States sponsored Dr Humam to attend the Annual American Academy of Ophthalmology (AAO) meeting, the premier ophthalmology meeting in the world which he has said was "one of the highlights of his career." Having developed these skills, it would have been a shame if he could not have used them to serve a verv vulnerable segment of the population. Therefore, having the sponsorship of the Priory of



Canada for his salary is vital to continuing his important area of our work – paediatric care. In 2016, a total of 42,000 attendances were under 18 years of age and many of these children were seen by Dr Humam. He also heads up the ophthalmic residency training programme in the group, is the lead examiner for the Palestinian Board Exam in Ophthalmology and is a member of the Arab Board. which was instrumental in arranging for us to be surveyed (successfully) for accreditation of our residency training programme, by their team.

His work affects not only the children treated, but also has a positive socio-economic impact on their families and eventually the oPt in general.

From Medical Resident in 1993 to an integral member of our team in 2016, Dr Humam's journey is one that has been shared by all St John Priories in some way or another. Even

those who did not directly fund his training or salary will have funded a piece of equipment used, or an operation which he performed.

This is just one individual amongst thousands that are directly impacted by the support of St John Priories and national offices worldwide each year at SJEHG. We would like to take this opportunity to thank and celebrate the St John Family for their continued support.

Regular Giver Ambassador

Patricia Mantoura



London-based Palestinian, Patricia Mantoura is a life-long supporter of SJEHG.

In her own words Patricia describes her involvement with our work.

"My family is from Jerusalem and I have fond memories of St John Eye Hospital from my childhood. My grandfather was a doctor in Jerusalem and closely associated with the Hospital, and I am very short-sighted and attended the Hospital for check-ups.

Having such terrible vision has taught me the importance of eyesight, and I have experienced first-hand the impact that good eye care can have on one's life. St John is a charity that does amazing work, particularly for those who are unable to otherwise access treatment.

Sadly my family left Palestine after the Six-Day War in 1967. I have only been able to return for a couple of very short

visits, and thus could not see first-hand the amazing developments that have taken place at St John in the last few decades.

Instead, I focus my efforts on raising funds for the hospital from here in the UK. I particularly enjoy attending the regular London fundraisers where I have met so many people with equal enthusiasm for the cause. The Christmas Gift of Sight Fair in particular is such a wonderful way to give back to the Holy Land during the festive season.

Another way I keep involved is through my Regular Giving

donations. I know that without funding the charity would not be able to continue its vital services. It feels great to give back to a charity which has changed countless lives – including my own."

Regular Giving makes up the backbone of our funding, ensuring we have a regular flow of income year round, ready to invest where it is most needed. If you would like to set up a regular donation please contact our office on +44 (0)20 7253 2582 or go online - www.stjohneye hospital.org/support-us



Public Benefit



The Trustees have given due regard to the Charity Commission's General Guidance on public benefit when planning the charity activities. Our Trustees' Annual Report sets out our activities, achievements and performance during the year, which are directly related to the objects and purposes for which SJEHG exists. SJEHG achieves its principal objectives through the delivery of services to members of the public in Jerusalem, the West Bank and Gaza without regard for any distinction by race, class, religion, or ability to pay.

The Public Benefits from SJEHG's activities are:

- a. the provision and development of clinical and surgical ophthalmic services to patients at the hospitals in Jerusalem, Gaza and Hebron; the Anabta and Muristan Clinics as well as the Mobile Outreach Programme;
- **b.** the exemption from patient charges when the relevant authority does not finance the treatment and the patient is unable to pay all or part themselves;
- c. the teaching and training activities at SJEHG which enhance the quality of service delivered and increase the pool of qualified ophthalmologists, specialist nurses and allied health professionals within the region;
- **d.** the research activities into endemic diseases affecting the Palestinian population;
- e. our services enhance education and employment prospects and contribute to economic growth.

Strategic Report: Strategic Plan 2017-2020

Vision

By 2020 SJEHG will be:

Known for providing the highest standards of patient experience, outcomes and safety across all our sites;

Ensuring a financially secure future whilst not compromising in reaching out to as many people as possible, irrespective of race, religion, social class or ability to pay;

Making a significant on-going contribution to national and international research with key partners, Hadassah Medical Center and Moorfields Eye Hospital;

Maintaining its status as the leading and largest charitable eye care provider in Palestine;

Shaping the development and delivery of the eye health agenda nationally;

Developing a leading role in the training and education of eye health clinicians.

Strategic Focus

Patients: Achieve the highest standards of quality and patient safety.

SJEHG will build on its JCI accreditation continually to strengthen standards and protocols on quality care and patient safety. As a leading training facility for ophthalmologists and ophthalmic nurses and

provider of care, clinical quality and safety with a continued emphasis on a positive patient experience will continue to be at the core of SJEHG's basic principles and mission.

Capacity: Expand clinical services and capacity.

SJEHG has built its in-house capacity to offer both basic and highly sophisticated eye care services by qualified specialists using the latest technology. It will continually strengthen its capacity to care for common and unusual eye diseases in a planned, systematic process.

Research: Initiate and develop a research capacity.

SJEHG's patient population lends itself to research in the areas of epidemiology, treatment methodologies and genetics. SJEHG will look to build its statistical research capacity to better understand disease patterns whilst publishing its findings. This will result in improved outcomes for patients.

Partnerships: Increase and develop partnership opportunities.

As a tertiary eye hospital providing comprehensive subspecialty eye care, teaching and training at all levels and the opportunity for research, SJEHG will continue to seek partnership opportunities in the Middle East and globally.

Reputation: Enhance our global reputation.

SJEHG is well known in the region as a centre providing high quality, comprehensive eye care services and training. We will continue to build that reputation globally through supporter focused communications, thus increasing visibility, donor support and, over time, SJEHG's brand in geographic areas of priority.

Gaza: Commitment to Gaza.

SJEHG has served the people of Gaza for decades with a small clinic in Gaza City. The new modern eye hospital offers comprehensive, subspecialist care and training within a very challenging environment. SJEHG's board and staff recognise these unique challenges and are committed to providing the best quality eye care and services for residents.

Finance: Ensure sustainability.

Ensuring a financially secure future whilst not compromising in reaching out to as many people as possible.

The seven areas of strategic focus are unchanged from the 2013 – 2017 strategic plan but the extension to 2020 reflects the progress made since 2013 and makes appropriate adjustments to reflect changed circumstances and opportunities. It is anticipated that a thorough review will be necessary after 2020.

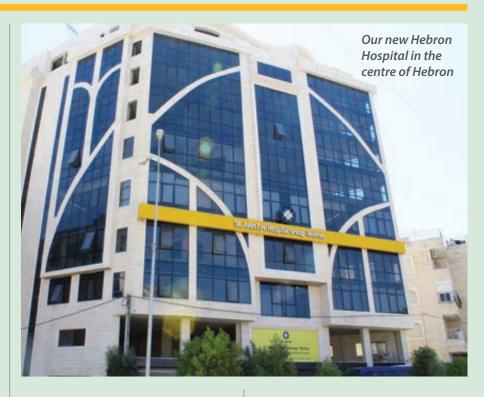
Strategic Report: Financial Review

Achievements and Performance in 2016

For the year ended 31
December 2016, incoming resources amounted to £10.8m, (2015, £8.5m)
while resources expended amounted to £9.7m (2015, £8.2m). This resulted in a surplus of £1.1m (2015, £0.3m) before taking into account realised and unrealised gains on investments of £1m and exchange gains of £0.9m. Overall fund balances accordingly increased by £3.0m in the year.

During the year patient-related surgical income increased as we negotiated a price increase with the PA and focused on more complex cases. Within voluntary income, donations from St John Priories increased from £2.2m in 2015 to £2.9m in 2016, in particular through the Priory of the United States. Our fundraising efforts were focused on obtaining grants for operating activities.

Expenditure on charitable activities amounted to £8.9m, being 92% of total resources expended. These costs include running the hospitals in Jerusalem, Hebron and Gaza, the Anabta Clinic, Muristan Clinic, two Mobile Outreach Units and the cost of teaching and training during the year for doctors, nurses and allied health professionals. The expenditure on charitable activities is primarily personnel costs which makes up 59% of the total cost



(2015, 63%). Operating costs were contained through the continuation of enhanced cost controls introduced in earlier years. It should be noted that the increase in resources expended during the year was in part due to exchange rate fluctuation and the decline in the value of the Pound Sterling against the Shekel which is the primary operating currency.

Costs of generating funds constituted 7% (2015, 8%) of total resources expended and is the costs of the London-based fundraising team and the Jerusalem-based fundraising and projects team. Governance costs amounted to 1% (2015, 2%) of the total resources expended and reflect the international nature of the charity's activities and governance arrangements.

Total voluntary income increased to £6.3m (2015, £4.6m) representing 58% (2015, 54%) of the incoming resources. Donations included £1.1m (2015, £0.6m) restricted for capital projects and medical equipment, in addition to £2.9m (2015, £2.2m) donated by the Priories of the Order of St John.

Overall, the value of capital projects completed during the year amounted to £1.9m. Funds generated from charitable activities (mainly patient income) amounted to £4.4m and constituted 41% (2015, 44%) of total incoming resources. The remaining 1% of incoming resources related to income from investments.

The PA continues to pay for services rendered several months in arrears, reflecting

Strategic Report: Financial Review (cont...)



its own cash flow issues. Funding this level of debt impacts on SJEHG's cash flows although ameliorated when the European Commission and USAID paid a substantial part of the PA outstanding debt. Conversely, SJEHG benefits from the receipt of voluntary income, in particular for restricted purposes, in advance of the related expenditure, usually for capital projects.

The investment portfolio is held as a means of earning income to support operational activities and as reserves to ensure that SJEHG can continue to fulfil its charitable objectives, while maintaining the real value of capital over the medium to long term. The investment objectives include aiming for lower volatility than equity markets, higher diversification and only a modest exposure to illiquid assets. The Investment Committee reviews the portfolio's strategy and performance with the investment manager on a regular basis.

Reserves

At 31 December 2016, SJEHG had total funds of £17.6m (2015, £14.6m). This comprised permanent endowments of

£6.6m (2015, £5.9m), £1.6m (2015, £1.9m) in restricted income funds, and £9.4m (2015, £6.8m) in unrestricted reserves, of which £2.5m (2015, £2.6m) is available to meet the normal operating needs of SJEHG.

Reserves Policy

The Board of Trustees reviews annually the need for reserves in line with the guidance issued by the Charity Commission and consider that, in the context of the political and economic situation in the region in which SJEHG operates, unrestricted reserves need to be increased, when circumstances allow, to equate to at least six months

running costs (equivalent to £5.75m) to ensure that SJEHG can continue to run efficiently with adequate working capital. It is intended to be achieved through a renewed focus on cost-cutting, revenue generation, and the introduction of new sources of revenue and enhanced fundraising activity to ensure financial resilience and sustainability for the future.

Principal Risks and Uncertainties

A comprehensive risk management policy is in place with a risk register of all clinical, operational, financial, external, political and governance risks. The risk register is regularly reviewed by the relevant committees and the Board, with particular focus on residual risks.

A key risk which SJEHG faces continues to be financial. The position has been exacerbated by Brexit and the impact of the continuing reduction in value of Sterling against the Shekel resulting in a requirement for additional funding to be obtained not only to meet existing levels of costs but also to meet increased costs arising from changes to minimum wage legislation in Israel in 2017. SJEHG still relies heavily on voluntary income received mainly from donors in the Middle East, Europe, United Kingdom and the United States. In the current global financial situation, it remains a great challenge to continue to attract core funding from existing and new sources.

The fundraising strategy includes a focus on endowment and legacy giving in order to mitigate this risk as well as a focus on major gifts for core costs. Liquidity is a recurring issue, especially with the prolonged payment pattern of the PA for the services provided. SJEHG therefore sets aside a portion of the investment portfolio as a cash deposit, in order to ensure meeting the working capital needs. International currency exchange movements are an additional risk. It should be recognised that the significant exchange gains apparent from the annual results shown in the financial statements do not represent realisable gains which are capable of being utilised by SJEHG as they largely reflect the increase derived from the translation into Sterling of the Hospital premises with an unchanged Shekel valuation.

Operationally, patient and staff access to Jerusalem is crucial to the continuation of our ability to provide eye care services in the oPt. Working in a volatile region has inherent risks. Gaza has its own risks. The situation could escalate at any time as instability and strife continue to affect the neighbouring countries, a particular current concern.

Going Concern

With general reserves at 31 December 2016 of £2.1m and net current assets at year-end of £4.5m, it is considered by the Board of Trustees that SJEHG has sufficient resources and

liquidity to continue, for the foreseeable future, to manage their operations efficiently whilst maintaining a suitable flow of funds to be spent on fulfilling our charitable objectives.

Our planning process, including financial projections, has taken into consideration the current risks and its potential impact on future income. We believe that the uncertainties mentioned above will not call into doubt our ability to continue in operation. Accordingly, these financial statements have been prepared on a going concern basis.

Remuneration Policy

All roles within SJEHG are evaluated in order to determine where they fit on our pay scale. The salaries within the scale are determined by the market rates for an equivalent position. In exceptional cases, where the market information supports it. salaries may be above the top of the band. Each year, the payroll budget is reviewed, based on legislative, statutory and market changes, using a range of sources and taking account of affordability, all as part of the annual budgetary process.

Management consult with the Finance Committee of the Board, and a pay review proposal is submitted to the Board, which makes the decision on the proposal. Staff costs are set out in note 6 of the financial statements.

Trustees and Committee Members

The Trustees of the Charity, who are also the Directors for the purpose of company law, during the year and at the date of this report, are listed below:

Mr Nicholas Woolf

BSc (Econ) FCA CTA (Fellow) KStJ

Nicholas Woolf became a Board member and Chairman in June 2012. He is a Chartered Accountant and Chartered Tax Adviser and is a former partner with Arthur Andersen. He is a former trustee of Princess Alice Hospice, Beating Bowel Cancer, and Barts Charity and was a Non-Executive Director of Westminster Primary Care Trust.

Dr Maged Abu-Ramadan *MD FRCSEd OStJ*

Dr Maged Abu-Ramadan is a resident of Gaza, a Senior Consultant Ophthalmic Surgeon, and the Founder and President of the Palestinian Ophthalmological Society. In 2005 he was made Mayor of Gaza. He is the Treasurer of MEACO, and the Chairman of **Coastal Municipalities Water** Utility (CMWU). Previously, he was the Palestinian Authority **Director General of Hospitals** General Administration and the Director General of the **International Cooperation** Department of the Ministry of Health.

Dr Anne Coleman

MD PhD OStJ

Dr Anne Coleman is the Hospitaller for the St John Priory in the USA helping to form a strong link between the Priory and SJEHG. Dr Coleman is Professor of Ophthalmology in the Stein Eye Institute of the David Geffen School of Medicine at UCLA and also a Professor of Epidemiology. She is Vice-Chair for Academic Affairs for the Department of Ophthalmology and Director of the SEI Centre for Community Outreach and Policy. She is the Director of the American Academy of Ophthalmology H. Dunbar Hoskins, Jr, MD Center for Quality of Eye Care, which is responsible for the patient care guidelines and public health outreach of ophthalmologists in the USA.

Ms Susan Dingwall OStJ

Susan Dingwall is a partner of the international law firm, Norton Rose Fulbright LLP, specialising in insurance and risk issues. Ms Dingwall leads the firm's award-winning Islamic insurance practice and is a recognised expert in her field by Chambers, Legal 500, Islamic Finance News' Leading Lawyers, Euromoney's Guide to The World's Leading Women in Business Law and Euromoney's Expert Guides – Insurance & Reinsurance.

Mr Nicholas Goulding *BSc FCA CTA (Fellow) ATT OStJ*

Nicholas Goulding is SJEHG's
Treasurer and Secretary. He is
a Chartered Accountant and
Chartered Tax Adviser and is
a former partner with KPMG
LLP. He is Honorary Treasurer
of The HM Tower of London
Chapels Royal Foundation,
The Honourable Company of
Air Pilots, St Lawrence with St
Swithun Winchester, Blue Apple
Theatre and a Governor of Lord

Wandsworth College.

Dr Alastair McPhail CMG OBE

Dr Alastair McPhail has worked for the Foreign and Commonwealth Office for 22 years. In January 2014 he was appointed British Consul General to Jerusalem. He has had an illustrious career within the FCO serving in a number of European, Middle Eastern, and African Countries.

Mr Guy Morton OStJ

Guy Morton is a solicitor and was, until his retirement in 2014, a partner in Freshfields Bruckhaus Deringer LLP, with a practice specialising in banking and financial law and the regulation of financial markets. He was Senior Partner of the firm from 2006 to 2010. He has served on European Commission consultative groups relating to financial law reform and has represented the United Kingdom in relation to international law reform initiatives at the Hague Conference on Private International Law and UNIDROIT.

Mr John Pelly OBE OStJ

John Pelly qualified as an accountant in 1978. He joined the NHS in 1990, becoming Finance Director of Guy's and St Thomas' Hospitals on the merger of these two world-renowned hospitals in 1993 and subsequently Chief Operating Officer, where he remained until 2004 when he



became Chief Executive of Queen Elizabeth Hospital. In 2008 he was appointed Chief Executive of Moorfields Eye Hospital, a position he held until his retirement in late 2015. In 2017 he returned to Guy's and St Thomas' Hospitals as a Non-Executive Director.

Ms Nicki Shaw OStJ

Nicki Shaw is Chief Executive of Princess Alice Hospice. She previously worked at the British Heart Foundation, latterly as Programme Director for Prevention and Care. Her career has spanned the commercial, regulatory and voluntary sectors. She has participated in a number of National forums including the Palliative Care Funding Review and the DH Advisory Group on Health at Work.

Dr David Verity

MD MA BM BCh FRCOphth OStJ

David Verity joined the Board in 2016. Dr Verity is an ophthalmic consultant at Moorfields Eye Hospital, and Service Director for the oculoplastic department. He is an active national and international teacher and surgical trainer, with a particular interest in complex lacrimal and orbital disease, in addition to thyroid eve disease. He has contributed to over 100 manuscripts in scientific literature, is immediate past Treasurer of the British Oculoplastic Surgery Society, and in 2017 became Treasurer of the European Society of Ophthalmic Plastic and Reconstructive Surgery. Since 2010, he has been Editor-in-Chief of the journal ORBIT. He is developing the St John Ophthalmic Association globally.

Mr Herbert Von Bose

Herbert von Bose is a lawyer and worked for the European Commission in Brussels since 1983 where he rose to become the Director for Industrial Technologies. He joined the Johanniterorden in 1984 and was chairman of the Brussels Johanniter Group from 2002 to 2012. Since 2014 he has been Governing Commander of the Balley and is responsible for international affairs.

Dr Michael Nelson

MBChB FRCOphth MAEd OStJ (Retired)

Dr Michael Nelson retired from the SJEHG Board in March 2016.

Co-opted Committee Members who are not Trustees							
Mr Ken Baksh	Investment						
Mr Mark Cannon Brookes OStJ	Investment						
Sir Vincent Fean KCVO OStJ	Fundraising						
Mr Philip Hardaker FCA KStJ	Honours & Awards						
Mr Jamie Ingham Clark FCA CStJ	Finance & Honours and Awards						
Maj.Gen. Mark Strudwick CBE KStJ	Nominations						
Mr Timothy Walker CB	Audit						
Mr Robin Oake MBE QPM	Honours & Awards (Retired Oct. 2016)						
Col Sheenah Davies RRC DL DStJ	Honours & Awards (Retired Oct. 2016)						

Governance Structure

Board Committees:

Steering
Strategy & Planning
Clinical Governance
Finance
Audit
Fundraising*
Investment
Honours & Awards
Nominations

The Committee Terms of Reference were updated in 2016.

*The Guild, St John Ophthalmic Association, and Friends of St John Society are subcommittees of the Fundraising Committee. SJEHG is a company limited by guarantee in England. The Order of St John is the sole member of the Charity and appoints the Chairman of the Board of Trustees. The Board manages the business and affairs of SJEHG and usually meets three times a year, as does the Steering Committee, with at least one meeting at the Hospital in Jerusalem. The Board reviews the performance of SJEHG and in particular the performance of the hospitals in Jerusalem, Gaza, Hebron and the Anabta and Muristan Clinics, as well as the Mobile Outreach Programme. The Board also considers and approves the operational and capital budgets. The Board Committees focus in detail on their areas of responsibility and report back to the Board. The Board is aware

of the codification of directors' duties under the Companies Act 2006 and takes these duties into account in consideration of SJEHG's activities and within its Memorandum of Association. New Trustees are selected by the Board to maintain an appropriate balance of skills and experience. Trustees are appointed for a term of three years and may be reappointed for two further terms of three years, but are not normally eligible for a further reappointment. An induction programme is in place for new directors. The Board of Trustees delegates responsibility for the daily management of the Charity to the Chief Executive, Brigadier Tom Ogilvie-Graham, and the Medical Director, Dr Jeanne Garth.



Chief Executive Brigadier Tom Ogilvie-Graham *MBE CStJ PhD*

Tom Ogilvie-Graham served in the British army for 30 years, primarily with the Army Medical Services and with the Household Cavalry. His humanitarian work spans from Kuwait to Bosnia to Rwanda, as well as developing programmes for medical and public health support in Iraq and Afghanistan. He has represented the UK on NATO medical committees. He is a Barrister and a Fulbright Scholar at Cornell University, and has a Doctorate in Psychology from Edinburgh University, and a Bachelor degree in Veterinary Medicine & Surgery from Edinburgh University.



Medical Director **Dr. Jeanne Garth** *FRCSEd*

Dr Jeanne Garth was born in Bahrain, and obtained her Medical Degree from Bombay University, India in 1978. In 1980, she joined the department of Ophthalmology of the Salmaniya Medical Centre in Bahrain, which is recognised by the London, Edinburgh, Glasgow and Irish Royal Colleges for training in ophthalmology. She continued her training in Dublin and obtained a fellowship from the Royal College of Surgeons, Edinburgh. Dr Garth joined SJEHG as a Consultant Ophthalmic Surgeon in 2001 and became Medical Director in February 2002. Dr Garth will be retiring from SJEHG in 2017.

Statement of Trustees' Responsibilities

The Trustees (who are also directors of St John of Jerusalem Eye Hospital Group for the purposes of company law) are responsible for preparing the Trustees' Annual Report and the financial statements in accordance with applicable law and United Kingdom Accounting Standards (UK Generally Accepted Accounting Practice).

Company law requires the charity Trustees to prepare financial statements for each year which give a true and fair view of the state of affairs of the charitable company and the group and of the incoming resources and application of resources, including the income and expenditure, of the charitable group for that period.

The Trustees' Annual Report is prepared to meet the requirements for a directors' report, strategic report and accounts as required by company law.

In preparing the financial statements, the Trustees are required to:

- select suitable accounting policies and then apply them consistently;
- observe the methods and principles in the Statement of Recommended Practice: Accounting and Reporting by Charities (2015);

- make judgments and estimates that are reasonable and prudent;
- state whether applicable UK Accounting Standards, comprising FRS 102, have been followed, subject to any material departures disclosed and explained in the financial statements; and
- prepare the financial statements on the going concern basis unless it is inappropriate to presume that the charitable company will continue in business.

The Trustees are responsible for keeping adequate accounting records that are sufficient to show and explain the charitable company's transactions and disclose with reasonable accuracy at any time the financial position of the charitable company and the group and enable them to ensure that the financial statements comply with the Companies Act 2006. They are also responsible for safeguarding the assets of the charitable company and the group and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities.

The Trustees are responsible for the maintenance and integrity of the corporate and financial information included on the charitable company's website. Legislation in the United Kingdom governing the

preparation and dissemination of financial statements may differ from legislation in other jurisdictions.

In so far as the Trustees are aware at the time of approving our Trustees' Annual Report:

- there is no relevant information, being information needed by the auditor in connection with preparing their report, of which the group's auditor is unaware; and
- the Trustees have taken all the steps that they ought to have taken as a Trustee in order to make themselves aware of any relevant audit information and to establish that the charitable company's auditors are aware of that information.

The Trustees' Annual Report was approved by the Trustees on 9 May 2017 and signed on their behalf by:

Nicholas Woolf, Chairman St John of Jerusalem Eye Hospital Group Company no. 7355619 Charity no. 1139527 9 May 2017

Ni Julas Worsy

Independent Auditors' Report to the members of St John of Jerusalem Eye Hospital Group

Report on the financial statements

Our opinion

In our opinion, St John of Jerusalem Eye Hospital Group's group financial statements and parent charitable company financial statements (the "financial statements"):

- give a true and fair view of the state of the group's and of the parent charitable company's affairs as at 31 December 2016 and of the group's incoming resources and application of resources, including its income and expenditure and of the group's cash flows for the year then ended;
- have been properly prepared in accordance with United Kingdom Generally Accepted Accounting Practice; and
- have been prepared in accordance with the requirements of the Companies Act 2006.

What we have audited

The financial statements, included within the Trustees' Annual Report (the "Annual Report"), comprise:

- the group and parent charitable company balance sheets as at 31 December 2016;
- the group statement of financial activities and the group summary income and expenditure account for the year then ended;
- the group cash flow statement for the year then ended; and

 the notes to the financial statements, which include a summary of significant accounting policies and other explanatory information.

The financial reporting framework that has been applied in the preparation of the financial statements is United Kingdom Accounting Standards, comprising FRS 102 "The Financial Reporting Standard applicable in the UK and Republic of Ireland", and applicable law (United Kingdom Generally Accepted Accounting Practice).

In applying the financial reporting framework, the trustees have made a number of subjective judgements, for example in respect of significant accounting estimates. In making such estimates, they have made assumptions and considered future events.

Opinion on other matter prescribed by the Companies Act 2006

In our opinion, based on the work undertaken in the course of the audit:

- the information given in the Trustees' Annual Report, including the Strategic Report, for the financial year for which the financial statements are prepared is consistent with the financial statements; and
- the Strategic Report and the

Trustees' Annual Report have been prepared in accordance with applicable legal requirements.

In addition, in light of the knowledge and understanding of the parent charitable company and its environment obtained in the course of the audit, we are required to report if we have identified any material misstatements in the Strategic Report and the Trustees' Annual Report. We have nothing to report in this respect.

Other matters on which we are required to report by exception

Adequacy of accounting records and information and explanations received

Under the Companies Act 2006 we are required to report to you if, in our opinion:

- we have not received all the information and explanations we require for our audit; or
- adequate accounting records have not been kept by the parent charitable company, or returns adequate for our audit have not been received from branches not visited by us; or
- the parent charitable company financial statements are not in agreement with the accounting records and returns.

We have no exceptions to report arising from this responsibility.

Trustees' remuneration

Under the Companies Act 2006 we are required to report to you if, in our opinion, certain disclosures of trustees' remuneration specified by law are not made. We have no exceptions to report arising from this responsibility.

Responsibilities for the financial statements and the audit

Our responsibilities and those of the trustees

As explained more fully in the statement of trustees' responsibilities, the Trustees are responsible for the preparation of the financial statements and for being satisfied that they give a true and fair view.

Our responsibility is to audit and express an opinion on the financial statements in accordance with applicable law and International Standards on Auditing (UK and Ireland) ("ISAs (UK & Ireland)"). Those standards require us to comply with the Auditing Practices Board's Ethical Standards for Auditors.

This report, including the opinions, has been prepared for and only for the charity's members and trustees as a body in accordance with Chapter 3 of Part 16 of the Companies Act 2006 and for no other purpose. We do not, in giving these

opinions, accept or assume responsibility for any other purpose or to any other person to whom this report is shown or into whose hands it may come save where expressly agreed by our prior consent in writing.

What an audit of financial statements involves

We conducted our audit in accordance with ISAs (UK & Ireland). An audit involves obtaining evidence about the amounts and disclosures in the financial statements sufficient to give reasonable assurance that the financial statements are free from material misstatement, whether caused by fraud or error. This includes an assessment of:

- whether the accounting policies are appropriate to the group's and the parent charitable company's circumstances and have been consistently applied and adequately disclosed;
- the reasonableness of significant accounting estimates made by the trustees; and
- the overall presentation of the financial statements.

We primarily focus our work in these areas by assessing the trustees' judgements against available evidence, forming our own judgements, and evaluating the disclosures in the financial statements. We test and examine information, using sampling and other auditing techniques, to the extent we consider necessary to provide a reasonable basis for us to draw conclusions. We obtain audit evidence through testing the effectiveness of controls, substantive procedures or a combination of both.

In addition, we read all the financial and nonfinancial information in the Annual Report to identify material inconsistencies with the audited financial statements and to identify any information that is apparently materially incorrect based on, or materially inconsistent with, the knowledge acquired by us in the course of performing the audit. If we become aware of any apparent material misstatements or inconsistencies we consider the implications for our report. With respect to the Trustees' Annual Report (incorporating the Strategic Report), we consider whether this report includes the disclosures required by applicable legal requirements.

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Andrew Lowe

(Senior Statutory Auditor) for and on behalf of PricewaterhouseCoopers LLP Chartered Accountants and Statutory Auditors London 9 May 2017

Consolidated Statement of Financial Activities

for the year ended 31 December 2016

	Notes	Unrestricted Funds 2016 £000	Restricted Funds 2016 £000	Endowment Funds 2016 £000	Total Funds 2016 £000	Total Funds 2015 £000
Income and Endowments	110100	2000	2000	2000	2000	2000
Donations and legacies	3	1,783	4,468	-	6,251	4,598
Income from investments		48	96	-	144	147
Income from charitable activities	4	4,416	-	-	4,416	3,776
Total Income and Endowments		6,247	4,564	-	10,811	8,521
Resources Expended						
Expenditure on generating funds		(692)	_	_	(692)	(622)
Expenditure on charitable activities		(6,014)	(2,933)	_	(8,947)	(7,407)
Other expenditure		(111)	(=,000)	_	(111)	(170)
Total Resources Expended	5	(6,817)	(2,933)		(9,750)	(8,199)
Net gains on investments	8, 14	363	-	688	1,051	6
Net (Expenditure) / Income		(207)	1,631	688	2,112	328
Transfers between funds	12,13	1,853	(1,853)	-	-	-
Exchange gains on overseas activities		928	-	-	928	179
Net Movement in Funds		2,574	(222)	688	3,040	507
Fund balances brought forward at 1 January		6,818	1,864	5,918	14,600	14,093
Fund balances carried forward at 31 December	15	9,392	1,642	6,606	17,640	14,600

All gains and losses recognised in the year are included in the Statement of Financial Activities.

Group Summary Income and Expenditure Account for the year ended 31 December 2016

	2016	2015
	£000	£000
Income	10,811	8,521
Expenditure	(9,750)	(8,199)
Net income	1,061	322

0046

The income and expenditure account excludes the unrealised investment and exchange gains shown in the Statement of Financial Activities.

All the above results are derived from continuing activities.

The accounting policies and the notes on pages 33 to 44 form part of these financial statements.

Balance Sheets

as at 31 December 2016

		Group	Group	Charity	Charity
		2016	2015	2016	2015
	Notes	£000	£000	£000	£000
Fixed Assets					
Tangible assets	7	6,848	4,232	5	6
Investments	8	11,110	10,237	9,929	8,909
Total Fixed Assets		17,958	14,469	9,934	8,915
Current Assets					
Stocks and work in progress	9	464	364	-	-
Debtors	10	2,651	1,730	597	63
Cash at bank and in hand		2,747	3,009	1,651	1,243
Total Current Assets		5,862	5,103	2,248	1,306
Creditors: Amounts falling due within					
one year	11	(1,400)	(1,519)	(29)	(36)
one your		(1,100)	(1,010)	(20)	(00)
Net Current Assets		4,462	3,584	2,219	1,270
Total Assets Less Current Liabilities		22,420	18,053	12,153	10,185
Creditors: Amounts falling due after					
more than one year	11	(4,780)	(3,453)	-	-
Net Assets		17,640	14,600	12,153	10,185
The Funds of the Group and Charity					
Restricted income funds	13	1,642	1,864	322	432
Endowment funds	14	6,606	5,918	6,606	5,918
Unrestricted income funds	12				
Designated		6,848	4,232	5	6
Revaluation reserve		487	146	487	146
Other general reserves		2,057	2,440	4,733	3,683
Unrestricted income funds		9,392	6,818	5,225	3,835
Total Group and Charity Funds	15	17,640	14,600	12,153	10,185

The accounting policies and the notes on pages 33 to 44 form part of these financial statements.

The financial statements were approved by the Trustees on 9 May 2017 and signed on their behalf by:

Nicholas Woolf Chairman Nicholas Goulding Treasurer

Consolidated Cash Flow Statement

for the year ended 31 December 2016

	Notes	Group 2016 £000	Group 2015 £000
Net cash inflow from operating activities	16	1,844	1,149
Cash flows from investing activities			
Investment income		144	147
Purchase of tangible fixed assets	7	(2,500)	(1,400)
Proceeds from disposal of tangible fixed assets		72	6
Purchase of fixed asset investments	8	(623)	(77)
Proceeds from sale of fixed asset investments	8	801	4
Net cash outflow from investing activities		(2,106)	(1,320)
Change in cash and cash equivalents in the financial year		(262)	(171)
Cash at bank and in hand at 1 January		3,009	3,180
(Decrease) in cash in the year		(262)	(171)
Cash at bank and in hand at 31 December		2,747	3,009

The accounting policies and the notes on pages 33 to 44 form part of these financial statements.

Notes to the Financial Statements

for the year ended 31 December 2016

1 Principal Accounting Policies

a Basis of preparation

The financial statements have been prepared on the going concern basis, under the historical cost convention, except for investments which are stated at market value, with items recognised at cost or transaction value unless otherwise stated in the relevant note(s) to these financial statements. The financial statements have been prepared in accordance with the Statement of Recommended Practice: Accounting and Reporting by Charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) effective 1 January 2015 and the Financial Reporting Standard applicable in the United Kingdom and Republic of Ireland (FRS 102) and the Companies Act 2006.

These financial statements consolidate, on a line by line basis, the results and financial position of St John of Jerusalem Eye Hospital Group (the "Charity") together with its wholly owned and controlled charitable subsidiary undertakings, St John of Jerusalem Eye Hospital and St John Eye Hospital in Jerusalem (RA) (together the "Group"). Transactions and balances between the Charity and its subsidiary undertakings have been eliminated from the consolidated financial statements. Balances between the companies are disclosed in the notes of the Charity's balance sheet. A separate statement of financial activities, and income and expenditure account, for the Charity is not presented because the Charity has taken advantage of the exemption afforded by section 408 of the Companies Act 2006 and Charities SORP FRS 102.

b Foreign currencies

Transactions in foreign currencies are recorded at the exchange rate ruling at the date of the transaction. Monetary assets and liabilities at the year end are translated at the rate ruling at the balance sheet date. Results of overseas operations are translated at the average rate for the period and their assets and liabilities at the balance sheet rate. All exchange differences are dealt with in the Statement of Financial Activities. The exchange rate of the Pound Sterling to the Shekel at 2016 year-end was 4.7252 (2015, 5.7840), while the average rate for 2016 was 5.2064 (2015, 5.9412).

c Income recognition

Donations and other income are recognised in the financial statements on a receivable basis. Grants are recognised when the entitlement to the grant is confirmed. Legacies are recognised when the entitlement arises, being the earlier of the Group being notified of the impending distribution or the legacy being received. Income from charitable activities is accounted for when earned. Subsidies and exemptions in respect of

medical services provided without charge are shown as a deduction from gross income.

d Medical volunteers

The value of services rendered by medical volunteers is recognised in these financial statements. However, where doctors, nurses or other members of staff are employed by the Group but paid by third parties, the estimated market cost of their services is recorded within both income (donations) and expenditure (salaries).

e Resources expended and basis of allocation of costs
Resources expended are accounted for on an accruals
basis and have been classified under headings that
aggregate all costs related to the category. Where costs
cannot be directly attributed to particular headings they
have been allocated to activities on a basis consistent
with use of resources. The irrecoverable value added tax
is included with the item of expense to which it relates.

f Costs of generating funds

These include the salaries and direct expenditure costs of the staff who primarily promote fundraising.

g Cost of activities in furtherance of the charity's objectives
These represent the costs of providing the medical and
training services of the hospital and its clinics including
both direct expenditure and the associated support costs.

h Governance costs

These comprise costs attributable to the overall management of the Group's affairs and compliance with constitutional and statutory requirements.

i Operating leases/rentals

The costs in respect of operating leases and rentals are charged to the Statement of Financial Activities on a straight line basis over the contract period.

The rental cost for the office in London occupied rent free has been computed based on an estimate of arm's length value. No charge is imputed in respect of the Hospital premises, which the Group occupied rent free until October 2015, after which it pays a nominal rent.

j Pension and other end of service costs

The amount charged in the Statement of Financial Activities in respect of pension costs is the contributions payable in the year on an accruals basis. Other end of service benefits are accrued as earned on an undiscounted basis.

Notes to the Financial Statements

for the year ended 31 December 2016

1 Principal Accounting Policies (continued)

k Taxation

The Charity and each group entity is entitled to certain tax exemptions on income and gains from investments, and surpluses on any activities carried on in furtherance of their primary charitable objectives.

I Tangible assets and depreciation

Cost of tangible assets includes the original purchase price of the asset and the costs attributable to bringing the asset to its working condition for its intended use. Donated fixed assets are brought into account at an estimate of their market value at the time of acquisition and, thereafter, depreciated on the bases set out below. The costs of minor additions to fixed assets under £200 are expensed in the year in which they are incurred. Impairment reviews are only carried out if there is an indication that the recoverable amount of an asset is below its net book value.

Depreciation on fixed assets is provided at rates estimated to write off the cost, less estimated residual value, of each asset over its expected useful life on a straight line basis, as follows:

Buildings - 2.5% per annum
Building improvements - 10% per annum
Medical equipment - 15% per annum
Motor vehicles - 20% per annum
Other equipment - 20% per annum
Fixtures and fittings - 6% per annum
Computer equipment - 33% per annum
UK office fixed assets - 25% per annum

m Investments

Listed investments are stated at market value. Realised gains and losses on investments are calculated as the difference between the sales proceeds and their market value at the start of the period, or subsequent cost. Unrealised gains and losses represent the difference between market values at the beginning and at the end of the period. Income from fixed asset investments is recorded on an accruals basis is recorded on an accruals basis. Market value for unlisted investments is calculated by the fund managers using underlying financial information.

n Liquid resources

Liquid resources are cash, time deposits, and certificates of deposit.

o Stocks

Valuation of stocks is determined using the "first in-first out" method and stocks are stated at the lower of cost and net realisable value.

p Funds

Unrestricted funds are funds which are generally available for the Group to carry out its charitable objectives; these include designated funds, which are amounts that have been set aside to finance fixed assets.

Restricted funds are funds which are subject to specific conditions imposed by the donors.

Endowment funds are capital funds where the capital cannot be spent in the normal course of activities, although the income is added to restricted or unrestricted

funds depending on the terms of the original endowment.

q Estimates and assumptions

The preparation of financial statements in conformity with generally accepted accounting principles requires the use of estimates and assumptions that affect the reported amounts of assets and liabilities at the date of the financial statements and the reported amounts of income and expenditure during the reporting period. Although these amounts are based on trustees' best estimates of the amount, events or actions may mean that actual results ultimately differ from those estimates, and these differences may be material. The estimates and underlying assumptions are reviewed on an ongoing basis. Revisions to accounting estimates are recognised in the period in which the change takes place if the revision affects only that period, or in the period of the revision and future periods.

Exchange rate is fundamental to the uncertainties. Mainly, the impact of subsequent adverse movements between the exchange rates of the reporting and the operative currencies which would potentially affect to some extent the operating capability notwithstanding the enhanced but unrealisable balance sheet value of non UK located fixed assets. The Group provides against receivables by making judgements based on experience regarding the level of provision required to account for potentially uncollectible receivables.

2 Legal status

The Charity was incorporated in England as a company limited by guarantee on 24 August 2010 under registration number 7355619. It is registered as a charity under number 1139527. The registered office is at 4 Charterhouse Mews, London EC1M 6BB. It has no share capital and the liability of each member in the event of winding up is limited to £10.

3 Donations and Legacies

	Unrestricted	Restricted	2016 Total	Unrestricted	Restricted	2015 Total
	£000	£000	£000	£000	£000	£000
Donations and gifts	1,341	4,412	5,753	1,191	2,895	4,086
Legacies	302	56	358	327	-	327
Donations in kind	140	-	140	185	-	185
	1,783	4,468	6,251	1,703	2,895	4,598

Donations in kind includes the estimated market cost of medical services donated by visiting doctors to the Jerusalem Hospital of £8,000 (2015, £11,000); the value of donated tangible assets and medical supplies was £132,000 (2015, £174,000). Income from related parties is set out in note 18.

Notes to the Financial Statements

for the year ended 31 December 2016

Income from Charitable Activities

	2016	2015
	£000	£000
Outpatient income	1,691	1,553
Surgical income	2,936	2,522
Less: Patient Relief	(441)	(494)
Net patient related income	4,186	3,581
Other hospital income	74	37
Rental income, board and lodging	156	158
Total other income	230	195
Total income from charitable activities	4,416	3,776

Patient Relief represents subsidies and exemptions to cover the value of medical services rendered when payment is waived by the Group where funding is not available from the relevant authorities and where the patients are unable to pay any balance owing. All of the above income comprises unrestricted funds.

5 Total Resources Expended

	Costs of Generating Funds 2016	Costs of Generating Funds 2015	Charitable Actvities 2016	Charitable Actvities 2015	Governance Costs 2016	Governance Costs 2015	Total 2016	Total 2015
	£000	£000	£000	£000	£000	£000	£000	£000
Personnel costs (note 6)	316	281	5,393	4,661	38	45	5,747	4,987
Medical costs	-	-	1,691	1,284	-	-	1,691	1,284
Establishment costs	75	80	568	497	15	16	658	593
Depreciation	3	5	939	694	1	1	943	700
Office expenses	34	38	191	144	4	4	229	186
Travel and subsistence	121	92	86	63	13	9	220	164
Marketing and publicity	109	104	-	-	-	-	109	104
Auditors' remuneration	-	-	-	-	48	58	48	58
Other professional fees	34	22	21	3	21	38	76	63
Legal fees	-	-	31	35	-	-	31	35
Finance costs	-	-	27	26	(29)	(1)	(2)	25
	692	622	8,947	7,407	111	170	9,750	8,199
Support costs included above	-	-	1,105	890	18	52	1,123	942

Total resources expended in 2015 of £8,199,000 comprise £5,767,000 for unrestricted funds and £2,432,000 for restricted funds.

	2016	2015
Support costs comprise:	£000	£000
Personnel costs	419	352
Establishment costs	295	261
Depreciation	94	70
Office expenses	194	147
Travel and subsistence	86	63
Other professional fees	37	23
Finance costs	(2)	26
	1,123	942

	2016	2015
Auditors' remuneration (excluding VAT):	£	£
External audit	35,104	36,307
Other services provided by external auditors	8,631	30,588
Sub-total	43,735	66,895
Internal audit	1,642	9,190
	45,377	76,085

Notes to the Financial Statements

for the year ended 31 December 2016

6 Employee Information

a Number of employees

The average monthly number of employees, including part time staff calculated on a full-time equivalent basis, analysed by function during the year was:

	2016	2015
	Number	Number
Medical and nursing	146	143
Support services	50	50
Fundraising	13	8
Administration	30	35
	239	236

b Staff costs

Description	2016	2015
	£000	£000
Wages and salaries	5,103	4,414
Social security costs	400	345
Other pension costs	200	170
Other related costs	44	58
	5,747	4,987

c Emoluments of employees

The number of employees whose emoluments (salaries and benefits in kind) fell within the following bands were:

	2016	2015
	Number	Number
£130,001 - £140,000	1	1
£120,001 - £130,000	1	-
£110,001 - £120,000	-	1
£100,001 - £110,000	-	-
£90,001 - £100,000	-	-
£80,001 - £90,000	1	1
£70,001 - £80,000	3	-
£60,001 - £70,000	3	3

During the year, provident benefits and pension contributions on behalf of these staff amounted to £18,000 (2015, £11,000).

d Remuneration received by key management personnel

The remuneration (salaries and benefits in kind) received by the 13 (2015, 11) senior management personnel in managing the operations of the Group amounted to £809,000 (2015, £689,000).

e Pension costs

Pension costs comprise the contributions payable to authorised Israeli money purchase pension schemes in respect of certain employees and a UK defined contribution retirement benefit scheme managed by an independent pension provider.

End of service benefits for non UK employees included in wages and salaries costs are included in the Balance Sheet in Creditors: Amounts falling due after more than one year.

Notes to the Financial Statements

for the year ended 31 December 2016

7 Tangible Assets

a Group

	Buildings &	Medical	Motor	Other	
	Improvements	Equipment	Vehicles	Assets	Total
Cost	£000	£000	£000	£000	£000
1 January 2016	4,268	5,012	170	1,719	11,169
Additions	1,140	739	201	420	2,500
Exchange differences	1,072	1,198	42	416	2,728
Disposals	-	-	(161)	-	(161)
31 December 2016	6,480	6,949	252	2,555	16,236
Depreciation					
1 January 2016	2,206	3,529	89	1,113	6,937
Charge for the year	218	480	39	206	943
Exchange differences	514	835	13	258	1,620
Disposals	-	-	(112)	-	(112)
31 December 2016	2,938	4,844	29	1,577	9,388
Net Book Value					
31 December 2016	3,542	2,105	223	978	6,848
31 December 2015	2,062	1,483	81	606	4,232

Other Assets comprise fixtures and fittings, computer and office equipment.

b Charity

	Othe	r
	Asse	s Total
Cost	00£	000£
1 January 2016	4	7 47
Additions		2 2
31 December 2016	4	9 49
Depreciation		
1 January 2016	4	1 41
Charge for the year		3
31 December 2016	4	44
Net Book Value		
31 December 2016		5 5
31 December 2015		6
of December 2010		, ,

Notes to the Financial Statements

for the year ended 31 December 2016

8 Investments

a Analysis of movements (Group)	Bank	Listed	
	Deposits	Investments	Total
	£000	£000	£000
Market value at 1 January 2016	790	9,447	10,237
Additions	365	258	623
Withdrawals	-	(798)	(798)
Disposals	-	(3)	(3)
Unrealised gains	-	1,051	1,051
Market value at 31 December 2016	1,155	9,955	11,110
Historical cost at 31 December 2016	1,155	8,496	9,651

		Listed	
b A	Analysis of movements (Charity)	Investments	Total
		£000	£000
N	Market value at 1 January 2016	8,909	8,909
Α	Additions	147	147
٧	Vithdrawals	(170)	(170)
	Disposals	(3)	(3)
U	Jnrealised gains	1,046	1,046
Ν	Market value at 31 December 2016	9,929	9,929
Н	Historical cost at 31 December 2016	8,474	8,474

c Listed investments:

Analysis by category of underlying holding and location

		2016 Group £000	2016 Charity £000	2015 Group £000	2015 Charity £000
Equity investments	- UK	3,131	3,131	2,806	2,806
	- Overseas	2,776	2,776	2,212	2,212
Fixed interest securities	- UK	218	218	209	209
Property Unit Trusts	- UK	490	490	489	489
Property Unit Trusts (unlisted)	- Europe	46	46	46	46
Hedge Funds	- UK	1,278	1,278	1,160	1,160
Hedge Funds (unlisted)	- USA	2	2	5	5
Sterling & Cash Instruments	- UK	1,988	1,988	1,982	1,982
Others	- Overseas	26	-	538	-
Market value of listed investments		9,955	9,929	9,447	8,909

Notes to the Financial Statements

for the year ended 31 December 2016

8 Investments (continued)

At 31 December 2016, the following pooled funds represented more than 4% of the total investment portfolio:

Group & Charity	2016 %	2015 %
Vanguard S&P 500 UCITS ETF	10.4	9.0
Schroders QEP Global Active Value Fund	10.0	8.8
Schroder Income Fund	9.2	8.7
Artemis UK Special Situations Fund	8.3	9.0
Trojan Fund	6.7	6.9
CF Ruffer Total Return Fund	6.5	6.6
Majedie UK Equity Fund	6.5	6.3
Aberdeen Foundation Growth Fund	5.7	5.9
Property Income Trust for Charities	5.0	5.8
AXA Framlington UK Select Opportunities Fund	4.7	7.1

d Bank deposits

Bank deposits classified as investments represent deposit funds managed by investment managers.

e Investment in subsidiaries

The Charity is the controlling member of St. John of Jerusalem Eye Hospital (SJEH), a UK registered charitable company limited by guarantee (Company No.3867950 and Charity No. 1080185) and having no share capital. The liability of each member in the event of winding up is limited to £10. SJEH provides ophthalmic services through a branch in the oPt.

The Charity is also the controlling member of St. John Eye Hospital in Jerusalem (RA) (SJEHJ), an Israeli registered charitable society (No. 580040368), limited by guarantee and having no share capital. SJEHJ provides ophthalmic services from the Jerusalem Hospital and the Mobile Outreach Programme.

SJEH owns two £1 shares being all the issued shares in The St. John Eye Hospital (Palestine) Limited, which has not traded since incorporation.

Summary of financial information for the subsidiary entities:

	St. John Eye Hospital in Jerusalem (RA) 2016 £000	St. John of Jerusalem Eye Hospital 2016 £000
Total income and endowments	8,069	1,299
Total resources expended	(7,530)	(1,680)
Net incoming / (outgoing) resources before other recognised gains	539	(381)
Other recognised gains	520	413
Net movements in funds	1,059	32
Total assets	8,600	3,599
Total liabilities	(5,080)	(1,507)
Total funds	3,520	2,092

Notes to the Financial Statements

for the year ended 31 December 2016

9 Stocks and Work in Progress

Stocks comprise hospital medical stores and supplies all owned by subsidiaries.

10 a Debtors

		Group	Group	Charity	Charity
		2016	2015	2016	2015
	Note	£000	£000	£000	£000
Trade debtors		1,549	1,316	1	1
Allowance for bad debts	10 b	(125)	(212)	-	-
Net trade debtors		1,424	1,104	1	1
Donations receivable		1,116	532	573	38
Other debtors		-	1	-	-
Prepayments and accrued income		111	93	23	24
Total Debtors		2,651	1,730	597	63

b Movement in allowance for bad debts

	Group	Group
	2016	2015
	£000	£000
1 January	212	167
Additions	383	394
Write off *	(439)	(355)
Exchange differences	(31)	6
31 December	125	212

^{*} The majority of the write off relates to an agreement with UNRWA whereby the actual contractual payments are lower than the normal invoiced value of services provided to those patients.

Notes to the Financial Statements

for the year ended 31 December 2016

11 Creditors

a Amounts falling due within one year

		Group	Group	Charity	Charity
		2016	2015	2016	2015
	Note	£000	£000	£000	£000
Trade creditors		476	476	6	19
Retirement benefits		393	-	-	-
Taxation and social security		83	63	9	1
Accruals		342	878	13	15
Deferred income	11 b	50	61	-	-
Holiday pay accrual		56	41	1	1
		1,400	1,519	29	36

b Deferred income

	Group	Group
	2016	2015
	£000	£000
1 January	61	92
Deferred income recognised	129	119
Deferred income released	(151)	(153)
Exchange differences	11	3
31 December	50	61

c Amounts falling due after more than one year

	2016	2015	2016	2015
	Group	Group	Charity	Charity
Retirement benefits	£000	£000	£000	£000
1 January	3,453	2,934	-	-
Additions	836	455	-	-
Exchange differences	803	126	-	-
Payments	(312)	(62)	-	-
31 December	4,780	3,453	-	

Accrued retirement benefits mainly represents amounts payable under Israeli law when staff leave the Group's employment. Such amounts are accrued when earned, based on current monthly salaries and periods of service. The balance also includes provident schemes in respect of certain Jerusalem employees.

Notes to the Financial Statements

for the year ended 31 December 2016

12 Unrestricted Income Funds

	1 January 2016	Incoming Resources	Resources Expended	Transfers	Gains & Losses	31 December 2016
			·			
	£000	£000	£000	£000	£000	£000
Group						
General reserves	2,440	5,761	(5,986)		(158)	2,057
Designated funds: Tangible fixed assets	4,232	486	(831)	1,853	1,108	6,848
Revaluation reserve	146	-	-	-	341	487
Total unrestricted funds	6,818	6,247	(6,817)	1,853	1,291	9,392
Charity						
General reserves	3,683	868	(524)	-	706	4,733
Designated funds: Tangible fixed assets	6	2	(3)	-	-	5
Revaluation reserve	146	-	-	-	341	487
Total unrestricted funds	3,835	870	(527)		1,047	5,225

Transfer from restricted funds represents amounts released from restricted funds for the purchase of tangible assets (2015, £927,000).

13 Restricted Income Funds

	1 January 2016	Incoming Resources	Charitable Activities	Purchase of Tangible Assets	31 December 2016
	000£	£000£	000£	£000	£000
Charity	2000		2000	2000	2000
Staff sponsorship	185	870	(991)	-	64
Outreach	-	53	(3)	-	50
West Bank and Gaza Facilities	8	23	(31)	-	-
Hebron capital project	47	-	-	(47)	-
Other capital projects	115	270	-	(385)	-
Patient relief	3	50	-	-	53
Income received from endowments	-	96	(96)	-	-
Other projects	57	106	(32)	-	131
Others value less in each case than £25,000	17	91	(84)	-	24
Total Charity	432	1,559	(1,237)	(432)	322
Capital projects	879	853	-	(1,421)	311
Other projects	535	2,075	(1,626)	-	984
Others value less in each case than £25,000	18	77	(70)	-	25
Total Group	1,864	4,564	(2,933)	(1,853)	1,642

Charity

- Staff sponsorship represents funds received to cover or contribute to staff costs of 47 hospital staff.
- · Outreach funds cover the running costs of two outreach units.
- West Bank and Gaza Facilities fund contributes to cover the operating costs of Gaza, Hebron and Anabta Clinic.
- Capital projects funds represent funds received from various UK Trusts and Middle East donors to purchase medical equipment and for the
 construction of the two new daycare hospitals in Gaza and Hebron and the rennovation of Muristan Clinic in the old city of Jerusalem.
- · Patient relief funds contribute towards the treatment costs of needy patients.
- Other projects include joint teaching programmes with other medical institutions and funds that cover the School of Nursing costs and Muristan.

Group

- Capital projects funds represent funds received from various donors to purchase a vehicle for the outreach project, new Health Management Information System, medical equipment, and for the construction of the two new daycare hospitals in Gaza and Hebron.
- · Other projects include donations received for the Diabetic Retinopahty Programme, Mobile Outreach Programme, patient relief, and Anabta Clinic.

Notes to the Financial Statements

for the year ended 31 December 2016

14 Endowment Funds Group and Charity

	1 January	Investment	31 December
	2016	Gains	2016
	£000	£000	£000
American Society of St John: Walsh Bequest	427	49	476
Bed Endowment	3,469	403	3,872
Frost Charitable Trust	466	55	521
Frost Nursing School	441	51	492
Mr. Owen Smith Endowment	94	11	105
The John Swire Foundation Endowment	1,021	119	1,140
	5,918	688	6,606

Investment gains for the year ended 31 December 2015 amounted to £10,000.

These funds represent:

- The American Society of St John: Walsh Bequest: The Bequest was made in 2000 in honour of the Rev. Canon Edward West and Don Wesley Lundquist, for the
 endowment of 2 beds in the Children's Ward at the Hospital's facilities, maintained for the care of needy children.
- The Bed Endowment Fund: Donations to endow 37 beds between 1981-1995, with the use of income restricted to general patient care in the Hospital.
- The Frost Endowment Funds: These amounts were donated in 1989 by The Frost Charitable Trust (Mrs Sally Frost) to endow 4 beds at the hospital and the Nurses Training School.
- · The Endowment of Mr Owen Smith was received in 2008 to fund professional medical training.
- The John Swire Foundation Endowment was received in 2013 to fund general operating costs.

Investment income on endowment funds is applied in providing the on-going services covered by the endowment and is accounted for as unrestricted investment income in the Statement of Financial Activities. Investment income for the year ended 31 December 2016 was £48,000 (2015, £50,000).

15 To	tal Group and Charity Funds	Unrestricted	Unrestricted	Restricted	Restricted	Endowment	Endowment	Total	Total
		Funds	Funds	Funds	Funds	Funds	Funds	Funds	Funds
а	Analysis by type of asset and liability (Group)	2016	2015	2016	2015	2016	2015	2016	2015
		£000	£000	£000	£000	£000	£000	£000	£000
	Tangible assets	6,848	4,232	-	-	-	-	6,848	4,232
	Investments	4,504	4,319	-	-	6,606	5,918	11,110	10,237
	Net current assets	2,820	1,720	1,642	1,864	-	-	4,462	3,584
	Creditors: Amounts falling due								
	after more than one year	(4,780)	(3,453)	-	-	-	-	(4,780)	(3,453)
		9,392	6,818	1,642	1,864	6,606	5,918	17,640	14,600
b	Analysis by type of asset and liability (Charity)								
	Tangible assets	5	6	-	-	-	-	5	6
	Investments	3,323	2,991	-	-	6,606	5,918	9,929	8,909
	Net current assets	1,897	838	322	432	-	-	2,219	1,270
		5,225	3,835	322	432	6,606	5,918	12,153	10,185

16 Reconciliation of net operating income to net cash inflow from operating activities

	2016	2015
	£000	£000
Net incoming resources	1,061	322
Investment income	(144)	(147)
Foreign exchange differences	(181)	7
(Gain) / Loss on disposal of tangible fixed assets	(22)	5
Depreciation	943	700
(Increase)/ Decrease in stocks	(100)	38
(Increase)/ Decrease in debtors	(921)	(406)
Increase in creditors	1,208	630
Net cash inflow from operating activities	1,844	1,149

Notes to the Financial Statements

for the year ended 31 December 2016

17 Trustees' Remuneration

The trustees receive no remuneration.

Reimbursement of trustees' expenses for travel, accommodation and flights for 10 trustees (2015, 10) during the year amounted to £45,868 (2015, £24,149).

Donations made by trustees amounted to £16,047 (2015, £10,648).

Charity Trustee Indemnity insurance is provided at a cost of £6,613 (2015, £6,440) to cover the charity, trustees and officers against potential claims and losses.

18 Related Parties Transactions

The Charity is a wholly owned subsidiary of The Most Venerable Order of the Hospital of St John of Jerusalem (Charity No. 235979, Principal Office: St John House, 3 Charterhouse Mews, London, EC1M 6BB).

The Jerusalem Hospital premises occupied by the Group are owned by the Order of St John and were previously occupied rent free on a full repairing basis. During 2015, the Group signed an agreement with the Order of St John to lease the Hospital in Jerusalem and similarly the Muristan property at nominal rent. In the opinion of the trustees, it would be impracticable to place a value on these facilities.

The Group also occupies on a rent free basis offices in London owned by the Order of St. John. The value of this facility has been estimated at £48,000 per annum based on the rents payable by the external tenants at the complex. This amount is included in the financial statements as a donation in kind.

The Chairman of the Charity, Mr. Nicholas Woolf, is also a trustee of The Most Venerable Order of the Hospital of St John of Jerusalem.

Donations and gifts include amounts received from Priories and Establishments of the Order of St John, which are considered to be related party transactions:

	2016	2015
Priory	£000	£000
USA	1,761	1,318
England and the Islands	407	468
Scotland	112	195
New Zealand	139	113
Australia	145	85
Canada	242	50
Wales	40	15
	2,846	2,244

	2016	2015
Other Members of St. John Family	£000	£000
Sweden	19	-
Singapore	-	2
Malaysia	21	-
	40	2

	2016	2015
Donations by the Priory of the United States:	£000	£000
Hospital - General Support	726	789
Hospital Restricted Gifts	565	262
USAID / ASHA Hospital Restricted Grant	470	267
	1,761	1,318

During the year, the Charity reimbursed the Priory of England and the Islands and the Order of St John £5,145 (2015, £13,836) in respect of certain expenses incurred.

No amounts were outstanding with any related parties at 31 December 2016 or 2015.

19 Contractual & Designated Obligations

In 2016, the Group received an approval for a grant funded by Fred Hollows foundation and The German Federal Ministry for Economic Cooperation and Development (BMZ). This project aims at expanding the level of operations within our Gaza branch through the introduction of Diabetic Retinopathy screening and epidemiological research components. The total value of this project is €1,760,000.

In 2016, the Hospital received a grant from the EU Peace Programme to establish a genetic research unit and lab at the main hospital in Jerusalem through training and technical capacity development. The total value of this project is €870,000.

In 2017, the Hospital will be establishing a corneal suite and a private clinic funded by USAID/ASHA and The Linbury Trust. The total value of this project is £920,000.

St John of Jerusalem Eye Hospital Group

Professional Advisers & Administrative Information

London & Registered Office 4 Charterhouse Mews London EC1M 6BB

Jerusalem Hospital 2 Mujir Eddin Street Sheikh Jarrah P.O. Box 19960 Jerusalem 91198

Bankers in the UK National Westminster Bank Plc 134 Aldersgate Street London EC1A 4JB

Barclays Bank PLC 1 Churchill Place London E14 5HP

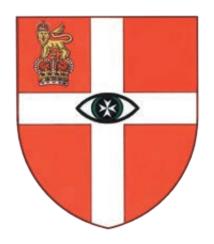
Bankers in the occupied Palestinian territories Bank of Palestine PLC Hebron Road P.O. Box 765 Bethlehem

Investment Managers Schroders (C.I.) Limited PO Box 334 Regency Court Glategny Esplanade St Peter Port Guernsey GY1 3UF

Independent Auditors PricewaterhouseCoopers LLP 1 Embankment Place London WC2N 6RH

St John of Jerusalem Eye Hospital Group (a UK Company Limited by guarantee, Company number 7355619, Charity number 1139527).

It has two charitable subsidiary undertakings, providing ophthalmic services in the occupied Palestinian territories; St John of Jerusalem Eye Hospital (a UK Company Limited by guarantee, Company number 3867950; Charity number 1080185) and St John Eye Hospital in Jerusalem (RA) (an Israeli charitable society, registration number 580040368).



Heraldically the Arms of SJEHG are blazoned as follows: Gules a Cross Argent in the first quarter the Royal Crest proper on the Cross the outline of a pointed Ellipse fesswise Sable enclosing a Pellet conjoined to a Descrescent and an increscent Vert throughout and charged with a Maltese Cross Argent.

As an entity of the Most Venerable Order of the Hospital of St John, the St John of Jerusalem Eye Hospital Group's coat of arms possesses the Order's characteristic white cross set on a red background with the Royal Crest in the top left corner. The symbol in the middle of the arms indicates the constituent entity of The Order of St John. St John of Jerusalem Eye Hospital Group's coat of arms is an emblem which is indicative of the organisation's commitment to its sight saving and life changing work. The arms are hued with the colours of the Palestinian flag, black, white, green and red, and instilled with an eye at the centre with the Amalfi Cross as its pupil. The eight points of the Amalfi Cross represent the Beatitudes from the Sermon on the Mount, and the four arms signify the Cardinal Virtues of Prudence, Justice, Temperance, and Fortitude. The iris of the eye has been created using two crescent moons, a Muslim symbol which highlights the denomination of the majority of the organisation's patients. The iris is a brilliant green, an allusion to the region being a fertile land.

All the images used in this report are of actual SJEHG staff and patients and they have given their consent.

Thank you

Our vital work is reliant on voluntary income from charitable donations

Without our donors, we could not continue saving sight and changing lives. The patients and staff at SJEHG greatly appreciate the support of everyone who has given or helped in some way in 2016.

The St John Priories from around the world have once again delivered much valued assistance to SJEHG. We thank the **Priories of Australia**, **Canada**, **England**, **New Zealand**, **Scotland**, **the USA and Wales** for their continuing support. We are pleased to receive the support of our Patron Lord Vestey. We are grateful to the Guild, the Friends of St John Society, the Alliance of the Orders of St John, St John Associations and the St John Fellowship for their on-going and crucial support.

Further Major Donors 2016:

Australian Representative Office - Ramallah

The Estate of Mrs Sheila M Bell Dr & Mrs Anthony N Bethell Attalla Contracting Company The Ben May Charitable Trust

The Big Heart Foundation: Salam Ya Seghar

The Estate of Gwyneth Rosemary Botting

The Brillig Charitable Trust
The British Humane Association
The Bryan Guinness Charitable Trust

The Cadogan Charity CHK Charities Limited Children of Peace

CBM

Christian Foundation of the West The Clothworkers' Foundation

Mr Mark Coreth

Consulate General of Sweden

The Estate of Mrs Jaqueline Alice Cummins

Dr Michael and Dr Amira Dan

The David & Ruth Lewis Family Charitable Trust
The Dr Mortimer and Theresa Sackler Foundation

The Edwina Mountbatten & Leonora

Children's Foundation

Mrs Alan Elliot

The Eranda Rothschild Foundation

The European Union: EU Peace Building Initiative

The Evan Cornish Foundation Fred Hollows Foundation

The German Federal Ministry for Economic Cooperation and Development (BMZ)

The GNC Trust

Mrs Caroline Gavin

The Gosling Foundation Limited Help Age International (HAI)

The Hugh Symons Charitable Trust

Jersey Overseas Aid (JOA)

The John Swire 1989 Charitable Trust

Johanniterhjälpen

The Kadoorie Charitable Foundation

Mrs Julietta Khoury The Knights Templar

Sir Ian Gainsford (In Memory of Professor Anthony Mellows)

Medical Aid for Palestinians (MAP) UK The MBC Heritage of Islam Trust

The New Zealand Embassy in Anakra

Ms Denise Magauran

Mrs Elizabeth Mellows (In Memory of her husband Professor Anthony Mellows)

Mr Guy Morton

Dame Mary Perkins

Old City of Jerusalem Revitalization

Programme - Taawon
The PF Charitable Trust

The Park House Charitable Trust
The Pilkington Charities Fund

Foundation Pro Victimis

The Representative Office of Austria

The Representative Office of Czech Republic

to the Palestinian Authority

The Secretariat of the Alliance of the Orders of St John

The Sobell Foundation Source of Hope Foundation

The Sovereign Military Order of Malta (SMOM)

Mr Michael D Swan The Tamari Foundation The Thriplow Charitable Trust
The Estate of Pauline M Tullett
United Nations Development Programme (UNDP)
Community Resilience and
Development Programme (CRDP)

The United States Agency for International Development (USAID)

USAID American Schools and Hospitals Abroad (ASHA)
USAID Child Blindness Programme (CBP)
The Valentine Charitable Trust
Welfare Association (Taawon)
Mr & Mrs Robert Wilson (In Memory of
Olivia Marie Wilson Scott)



We would also like to thank the many diplomats who have taken the time to visit SJEHG this year. These included:

Marci Pius - Australian Representative
Donald Blome – United States Consul General
Dorothy Shea - United States Deputy Consul General
Pedro Abreu - Portuguese Representative
Veronique Hulmann - Head of Swiss Cooperation
Bruno Jans - Belgian Representative
Vincenzo Racalbuto - Head of Italian Cooperation
Rafael Matos – Consul General of Spain
Jose Luis Gonzalez – Deputy Consul General of Spain
Eduardo Algara – Deputy Consul General of Spain
David Quarrey - British Ambassador
Jonathen Kamin – Acting Head of Mission, USAID
Prikko-Liisa Kyostila - Representative of Finland

Alexandra Bukowska-McCabe - Head of Representative Office of Poland
Ann Sofie-Nilsson - Consul General of Sweden
Jonathan Conlon - Representative of Ireland
Ralph Tarraf - EU Representative
Justin Simpson - Ambassador,
Sovereign Military Order Of Malta
Dominique de La Rochefoucauld – Grand Hospitaller,
Sovereign Military Order Of Malta
Dr. Gerald Rockenschaub – World Health
Organization, Director General
Andrea Nassi - Austrian Representative Office
Dr. Michael Desser - Ambassador,
Austrian Embassy in Amman





St John of Jerusalem Eye Hospital Group If you would like to support St John of Jerusalem Eye Hospital Group or would like more information, please contact us:

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