



**St John of Jerusalem
Eye Hospital Group**

ANNUAL REPORT 2018

Chairman and CEOs' Introduction



Peter Khoury, Sir Andrew Cash and Dr Ahmad Ma'ali in the Jerusalem Hospital Gardens, September 2018.

We are pleased to share some of the amazing work and triumphs that happened in 2018. This has been our first full year as Joint CEOs of the St John Eye Hospital. In September, we were delighted to welcome Sir Andrew Cash OBE as our new Chairman and together we look forward to progressing the legacy of this vital institution.

Strong leadership, a unified culture and fierce determination drove much of our success in 2018. It also got us through a few challenges - in May, tensions in Gaza resulted in several casualties. We aided other general healthcare centres to provide care to those impacted by the violence, especially with the intake of several complex ophthalmic operations. In spite of these difficulties, we have grown our reach and range of tertiary care in our most vulnerable region.

In an unfortunate development for all in the East Jerusalem Hospital Network, substantial funding was lost in October from the US Administration. For St John, this meant a loss of funding of at least £500,000. We are expecting further budget deficits in 2019 as a result of these cuts, as well as the economic impact Brexit may have. Whilst we are making several efforts to streamline our costs, ultimately we are entering into 2019 with a big task ahead of us to fill the gaps left.

In spite of these concerns, we witnessed new levels of determination and strength which made 2018 a year of progression in our fight against preventable blindness in East Jerusalem, the West Bank and Gaza. Overall we saw over 147,600 patients and performed more than 5,200 major operations.

We are proud to be overseeing several projects across the oPt. Each of our operational goals – Accessibility, Quality Eye Care, Training and Research - have reached new highs in 2018, more of which can be read about in the following pages. These successes could not be possible without the dedication of our staff, who work tirelessly to provide the best eye care possible to all, regardless of race, religion or ability to pay – just as those before them set out to do 137 years ago. We thank them for their hard work throughout 2018.

In June, HRH Duke of Cambridge visited the Holy Land in the first official Royal visit in over 70 years. We were pleased to welcome His Royal Highness to our Peace Garden in the Muristan Clinic in the Old City, a celebration of the longstanding Royal connection to the Order of St John. There were several other visits from esteemed members of the international St John Family, of which you can read on page 18. We welcome all to witness our work first hand.

To all who supported SJEHG in 2018 - your gift has the power to help and heal. That's the magic of giving. We thank you for your continuing partnership and generosity. Our successes of the past year are ultimately your successes too and we hope that you enjoy the following summary of what we have achieved together. Thank you.

We look forward to the challenges of 2019 and maintaining and enhancing the reputation and effectiveness of the work we do. We hope you will continue to join us on that journey.

Sir Andrew Cash OBE
Chairman

Dr Ahmad Ma'ali
Joint CEO

Peter Khoury
Joint CEO

HOSPITALLER'S REPORT

Over the past three years I have visited many of St John's Priories, meeting our Priors, Hospitallers and members of the Order.

I am grateful for the hospitality at each and every visit, and the unshakable commitment of our Priories to our patients, despite the many challenges. Over decades of working visits to Jerusalem, Gaza and our units across the West Bank, the dedication of our CEOs and our staff – be they porter, driver, nurse or surgeon – has always been a professional and personal inspiration.

It was my honour in my role as Order Hospitaller to part-host the Guildhall Fundraising Dinner in June which, in a true reflection of our mission, brought together so many people to celebrate the work of St John Eye Hospital. Thanks to the generosity of our supporters we raised over £617,000 to fund our sight-saving work, relieving the heavy burden of eye disease among our patients.

In late 2018 the US administration reduced financial aid to the Palestinians. Together with the Chairman and CEOs, we coordinated an Emergency Appeal to respond to this immediate funding deficit. We are enormously grateful for the generous response from our international supporters, and especially the Priories and HM Queen Noor of Jordan, enabling us to exceed our target of £500,000. Now, the Chair and the Board are looking to a more sustainable funding model to put SJEHG on a more secure footing for the future.

As Hospitaller, I am personally focused on three core themes of our work: supporting our staff, providing quality information to the Priories, and raising SJEHG's academic and clinical profile. Academia can be perceived as a 'silent' investment, but is vital for SJEHG's world-wide reputation. With a catchment of over 4.5 million people, complex pathology, rising service demands (by over 60% in 10 years), and a high prevalence of blindness, it is our duty to provide our nurses and doctors with strong



David Verity with Jamil Abu Hani, our theatre manager, in the cloisters in Jerusalem.

postgraduate training and direction.

The St John Ophthalmic Association (SOA) was duly formed and now consists of 10 branches across 4 chapters, these including the European chapter (England, 2016; Scotland 2019), the Asia Pacific chapter (Perth, 2017), the Americas chapter (Chicago, 2018), and the Africa chapter (Cape Town, 2018).

In addition to the above meetings the SOA has published peer-reviewed manuscripts, arranged staff and medical student exchanges between London and Jerusalem, and donated to our school of nursing. Our staff have talent, resilience and loyalty to St John, and for both them and for the Order the time has come for our next major chapter: to build the postgraduate arm of SJEHG. In doing so, we improve the quality of our services, and attract professional support and funding for St John, strengthening the Order and our international academic profile in the process.

We should remember that throughout our history, the Order has always offered state-of-the-art care to those in need. St John's ancient hospice in the Muristan and the Sacra Infermeria in Malta were the most revolutionary hospitals throughout Europe. Today, we must surely strive tirelessly to build on their legacy.

**David H. Verity, OStJ, MD MA BM BCh FRCOphth
Order Hospitaller,
Chair, SOA
May, 2019**

I acknowledge with grateful thanks my confreres and colleagues around the world for their support in promoting the academic work described in this report.



**St John of Jerusalem
Eye Hospital Group**

Contents

2	Chairman and CEOs' Introduction
3	Hospitaller's Report
5	Our Work
6	Snapshot of 2018
7	Accessibility
8	Quality Eye Care
9	Training
10	Case Studies
12	Research
15	Partnerships
16	Reputation
17	Sustainability
18	Visits from Across the World
20	Trustees and Committee Members
24	Governance Structure
25	The Chief Executives/Public Benefit
26	Strategic Report: Strategic Vision
27	Strategic Report: Financial Review
30	Statement of Trustees' Responsibilities
31	Fundraising Statement
32	Independent Auditors' Report
34	SJEHG Financial Statements
50	Professional Advisors and Administrative Information
52	Thank You

Saving Sight Changing Lives

St John of Jerusalem Eye Hospital Group is the only charitable provider of expert eye care in East Jerusalem, Gaza and the West Bank. Our aim is to end preventable blindness throughout the oPt. We have been treating patients in the region regardless of their ethnicity, religion, social class or ability to pay for over 137 years. Our sight-saving work is carried out against challenging odds to the highest international standards.

All uncredited photos throughout this Annual Report have been taken by staff of SJEHG.

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

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

Glossary: 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

OUR WORK



Operational

ACCESSIBILITY:

Providing eye care to the most isolated and vulnerable people in the oPt.

QUALITY EYE CARE:

Using state-of-the-art techniques, infrastructure and standards to provide world-leading eye care to our patients.

TRAINING:

Investing in the local population to develop sustainable eye care services.

RESEARCH:

Establishing best practice for treating the eye conditions prevalent to the region in which we operate.

Strategic

PARTNERSHIPS:

Developing alongside international partners in the global fight against preventable blindness

REPUTATION:

Building on our history as part of the St John Family and as a centre of excellence to further our cause.

SUSTAINABILITY:

Ensuring a financially secure future, whilst maintaining eye care services for the population we serve.

SNAPSHOT OF 2018

We reached almost **147,600** patients, performed over **5,200** major surgeries and employed **268** people across our services.*

Anabta Clinic

We treated almost **20,500** outpatients at our Anabta Clinic.

20 staff members including, **12** medical, allied health and nursing professionals.

Gaza Hospital

We treated over **30,200** patients, and performed **1,200** major operations.

44 staff members, including **32** medical, allied health and nursing professionals.

Mobile Services (Gaza)

Our Mobile Outreach Programme, Diabetic Retinopathy Screening Programme and Rapid Assessment of Avoidable Blindness (RAAB) study all have screening elements in isolated communities and homes. These programmes in Gaza saw over **16,400** patients.

Jerusalem Hospital

We treated over **46,900** patients in our East Jerusalem Hospital, and performed almost **3,600** major operations.

188 staff members, including **108** medical, allied health and nursing professionals, **8** nursing students and **4** medical residents.

Muristan Clinic

Our Muristan Clinic and the mobile Old City School Screening project saw over **1,600** patients in 2018. **

Hebron Hospital

Our Hebron Hospital treated over **12,700** patients and performed over **410** major operations.

16 staff members including **13** medical, allied health and nursing professionals.

Mobile Services (West Bank)

Our Mobile Outreach Programme and RAAB study West Bank team screened almost **19,300** patients in total. **

**Staff numbers do not include four London staff*

***Muristan and West Bank Mobile Services staff are counted in our Jerusalem figures*



Running Costs 2018

	£'000	% needing covered by fundraising activities	% covered by patient income
Jerusalem Hospital	7,686	56%	44%
Muristan	85	98%	2%
Outreach	422	100%	0%
Hebron	563	19%	81%
Gaza	1,202	73%	27%
Anabta	517	30%	70%



ACCESSIBILITY



Issue:

Easy access to eye care and education on eye health is key in the fight against preventable blindness. Many eye conditions are irreversible if not treated quickly. It is, therefore, urgent to catch these early to save sight. Unfortunately, ophthalmic screening services are often underfunded. This is exacerbated in the oPt by access issues caused by the permit system, the Separation Wall and restriction of movement in both the West Bank and Gaza.

Response:

SJEHG works to increase accessibility to eye care in the region; we achieve this through strategic placement of centres for eye care, alongside mobile screening and education programmes. This has grown to include three hospitals (including our flagship Jerusalem Hospital), two clinics, a rolling Mobile Outreach Programme in the West Bank and Gaza, a Diabetic Retinopathy Screening Programme, School Screening project and the Rapid Assessment of Avoidable Blindness, due to finish in May 2019. You can see the full reach of our work in our Snapshot (page 6).

Dr Abdelhadi Isbetan, Ophthalmologist for the RAAB study, assessing a patient in their own home.

“Through my fieldwork so far I have found many neglected cases. One memorable case was a woman who had undiagnosed diabetes over many years and impact of diabetes on the retina had led to complete loss of vision. She had never sought treatment as her neighbours had incorrectly informed her that treatment could damage the eye. This was a painful case to witness as there was nothing we could do for her at her stage of diabetic retinopathy – the damage was irreversible.”

Highlights:

- The numbers of patients reached for screening and treatment increased by 9% across our services
- The introduction of our RAAB study and continuation of the Mobile Outreach Programme, Old City School Screening project, and Diabetic Retinopathy Screening project meant our mobile services saw a total of 36,747 patients*

**This number includes the screening project in the Old City which is counted as part of Muristan figures on page 6.*

Stats:

80%
of blindness is preventable

25%
of patients and their companions delayed or denied treatment in the West Bank rising to

43%
in Gaza

QUALITY EYE CARE



Issue:

Many eye conditions need regular, advanced medical treatment in order to ensure that they do not cause lasting damage to the eye. A commitment to the highest standards of quality and comprehensive eye care is important to ensure patient and staff safety and the greatest chance of treating each case successfully.

Dr Omar Abdel Dayem and Dr Haneen Shalalkeh, both graduates of the St John Eye Hospital Medical Residency programme, perform a surgery on Bahieh (a patient from the West Bank) June 2018.

Response:

Our Jerusalem Hospital was the first in the oPt to provide care for all 14 ophthalmic subspecialties (excluding oncology), achieve the Joint Commission International Accreditation (the gold standard for healthcare worldwide) and the ISO 9001:2015 Accreditation for Quality Control.

Our four satellite centres - Gaza, Hebron, Anabta and Muristan - also benefit from regular outpatient clinics run by our Jerusalem specialists. Much of the secondary care is provided from these centres. If there is a need for advanced treatment, patients will then be referred to our Jerusalem Hospital. We are also investing heavily in our ability to provide subspecialty treatment in Gaza to the same level as the Jerusalem Hospital by investing in training and quality of care practices from within. This will ensure our most vulnerable population is not left behind in the fight against preventable blindness.

Highlights:

- Introduction of Low Vision Therapy Unit to ensure a complete cycle of care for those whose low vision can not be treated
- Introduction of our Refractive Surgery Unit
- 36% increase in major surgeries at our Gaza Hospital
- 14 visits from our Jerusalem-based specialists to perform advanced eye care in Gaza



Nasrallah Khalileh delivers a lesson on causes of eye problems in the oPt with the Sir Stephen Miller School of Nursing class of 2018. SJEHG employs over 265 staff across the oPt and have trained over 200 ophthalmic nurses and nursing assistants since the launch of the Sir Stephen Miller School of Nursing.

TRAINING



Highlights:

- Gazan doctor, Dr Bassam Alhabibi completed his Oculoplastic subspecialty in Jerusalem
- Our School of Nursing was upgraded to a Level 6 NVQ qualification (degree level) by the University of West London
- A number of our consultants attended conferences and courses in their subspecialties throughout 2018:
 - **Dr Salam Erakat** attended a Uveitis course in Moorfields
 - **Dr Bashar Jaber** attended the European Society of Ophthalmic Plastic and Reconstructive Surgery Meeting (ESOPRS)
 - **Dr Alaa Talbishi** and **Dr Marina Doulani** attended the Euroretina meeting in Vienna
- Eight nurses graduated from the Sir Stephen Miller School of Nursing Course, and five Medical Residents continued their studies

Stats:

Overall unemployment in the oPt:

32%
(the highest in two decades)

54%
of the Gazan labour force are unemployed, and youth unemployment is at **70%**

Among countries such as the UK and Israel there are 8.9 nurses per 1,000 people (Organisation for Economic Co-operation and Development, 2014). This is compared to just

2.2 nurses per 1,000 people in the West Bank and

3.4 nurses per 1,000 people in the Gaza Strip (Palestinian Central Bureau of Statistics, 2014)

Issue:

Providing world-leading eye care is impossible without staff trained to the highest standard, especially as the oPt is facing a nursing and doctor shortage. Previously, SJEHG relied heavily on expatriate doctors and nurses to run our services. However, this was not practical as staff would leave during times of conflict, resulting in our hospital being regularly short staffed or having to close its doors for weeks or sometimes months at a time.

Response:

SJEHG invests in the local Palestinian population to ensure a sustainable and consistent provision of world-class eye care. Our Medical Residency Programme is the only option for Palestinian doctors to specialise in ophthalmology. Once qualified, our specialists can undertake fellowships in subspecialties and professional development training throughout their career. Their fellowships are often undertaken in partner organisations such as Moorfields Eye Hospital (London), Aravind Eye Institute (India) and Hadassah Medical Center (Israel). Our partnership with the latter organisation has seen us both receive peace awards for our commitment to medicine in spite of the political backdrop against which we operate.

We also offer up to ten places each year at our prestigious Sir Stephen Miller School of Nursing, which is accredited by the University of West London. Those who stay with us have opportunities for further career development, and a number of our graduates are now in upper management positions across our organisation.

Case study:

Hani Abu Haja

Anabta Clinic Coordinator

“It is a dream to work for St John Eye Hospital. I don’t think people who are not from here realise quite the reputation it has in the area

– everyone knows of St John here, and the quality of care it represents. My father is 90 years old – he remembers it since it was on Bethlehem Road [its original location] – what other medical centre in this region has that kind of history or prestige?

I know it is said often but at St John people really are like a family. Everyone respects each other here. I come from a refugee camp in Jenin (my family were originally from Haifa and we have lived here ever since we had to move). I thank God every single day for my chance to work at St John. It has been one of life’s greatest blessings, thanks to St John I have been able to marry, build a home and family, and a career, I am so very grateful for this. I have four children and a beautiful wife Rana.

I graduated from the nursing school in 2002 and have worked here since 2003. I was honoured to be made the manager of the Anabta Clinic when it opened [in 2007], and am proud to say it is the most reputable centre for subspecialty care in the area. I look forward to seeing what the future holds for me here.”





Case study:

Mira

Mira is a 2-year-old from Gaza. You will find pictures of her journey at St John Eye Hospital in Jerusalem throughout this Annual Report. You can also watch a video of her journey on our Youtube channel: <https://tinyurl.com/mirasstory>

In June 2018, Mira travelled with her grandmother from Gaza to Jerusalem to stay for a week at our Jerusalem Hospital to undergo two cataract surgeries. Her parents were not allowed to accompany her due to the ongoing blockade on Gaza which restricts movements of people for healthcare though the permit system.

Our staff take extra-special care of these little

patients when they visit Jerusalem, as you can see from the pictures throughout this report. Nevertheless - imagine being away from your child as they undergo such life-changing surgery. We are working hard to establish advanced eye care services in Gaza so that this will no longer be an issue, and we thank you all for helping us make this aim a reality.

Mira arrived at our hospital nearly completely visually impaired, facing an uncertain future as she would have struggled with her education and independence. However thanks to two successful surgeries she walked out of the hospital fully sighted and towards a brighter future. Thank you to all who supported children like Mira throughout 2018. You can follow more of our patient and staff stories on our social media accounts, details of which can be found on page 52.



Issue:

The Palestinian population has a rate of blindness which is ten times as high as in the West, but insufficient research has been conducted. This means those attempting to combat preventable blindness in the region have little understanding of where to focus their efforts.

Response:

Rapid Assessment of Avoidable Blindness (RAAB)

RAAB is a population-based survey of adults age 50 years and over, using rapid examination techniques. In 2018 we launched the oPt's second-ever RAAB, which will give SJEHG a better understanding of where best to focus our efforts in the coming years.

Highlights:

- Our RAAB study began in July 2018 and screened almost 2,000 patients in 2018
- It is the first RAAB worldwide to use digital technology, such as smartphones to gather data, allowing for more efficient and centralised analysis

Anees Ghaneem, Ophthalmic Nurse for the Southern West Bank RAAB Team takes a visual acuity test on a smartphone. SJEHG's RAAB study is the first time this software has been used in the oPt.





Fida Abu Ali, the Project Coordinator, trains our Muristan Clinic Manager, Marline Katanasho, on how to use the DR Fundus Camera for screening, June 2018.

Diabetic Retinopathy (DR) Screening Programme

Diabetes (and related eye conditions such as (DR)) is one of the fastest growing health epidemics worldwide. We identified DR as a major focus for SJEHG in our first RAAB (conducted in 2008). Since then, we have developed a DR Screening programme which aims to screen patients and develop an integrated and comprehensive method for tackling the condition both at SJEHG and with general healthcare providers across the oPt.



Highlights:

- Our research in the Gaza Strip continued in 2018. Doctors, nurses and patients in general clinics are being studied for their knowledge, attitudes and practice toward diabetes
- 10,300 patients were screened for Diabetic Retinopathy in Gaza in 2018

Stats:

In 2010, the prevalence of diabetes in 25-64 year-old population of the occupied Palestinian territories was

12.7%

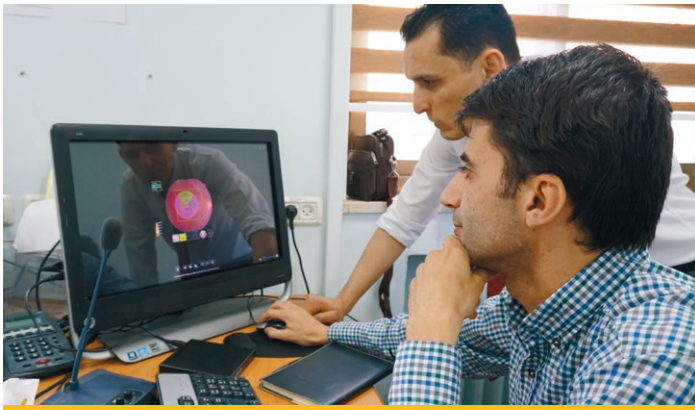
This number is predicted to reach

20.8%

in 2020 and

23.4%

in 2030



"Working in this field is not as satisfying as other fields of work because the results are not as instantaneous. We are often coming as the bearers of bad news which can be tough emotionally for both the parents and for ourselves, as the conditions we are treating seldom have an easy solution. The flipside of this is that we feel we are working on the forefront of our field – our entire career could be dedicated to finding a solution but that is exciting in its own way." - Dr Yehya Sweiti, Peace for Sight Researcher (pictured with Dr Alaa Talbishi).

Peace For Sight: Genetic Research Project

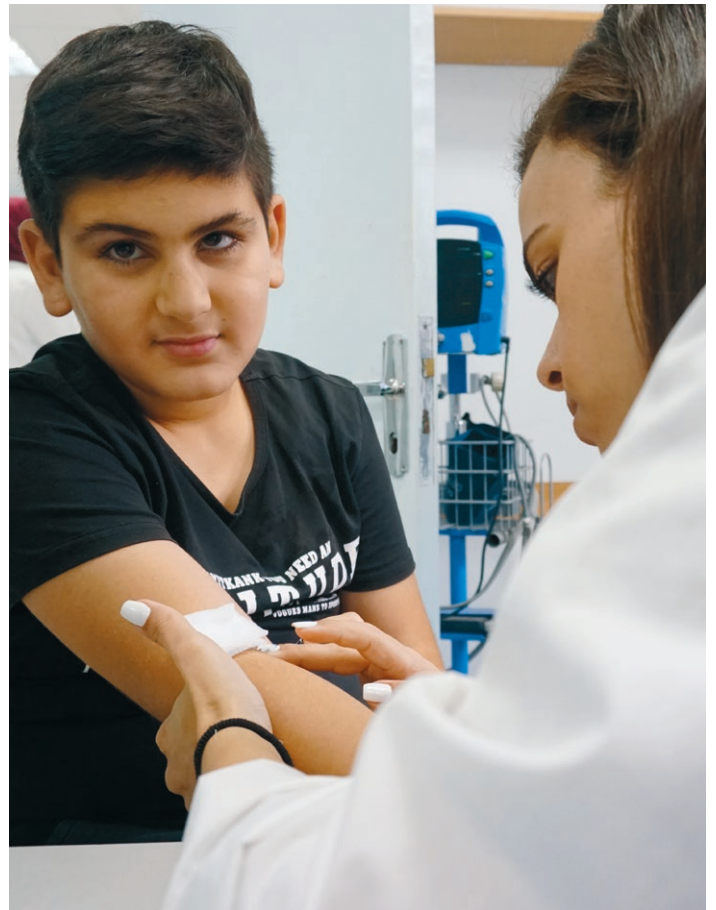
A desire to preserve cultural traditions and retain property within the family has led to a rise in intrafamilial marriage in the oPt, which leads to high levels of genetic eye disease. Our Peace for Sight Programme was established in 2016 in partnership with the European Union and Johanniterorden. Its objective is to gain an understanding of the prevalence and nature of hereditary retinal diseases which are common to Palestinians. Our doctors have been working in partnership with the Israeli Hadassah Medical Center, using their data and experience to corroborate their own research. Their research is now well underway and they have had a number of papers published in various journals.

Highlights:

- The oPt's Genetic Research Laboratory officially opened in February 2018
- Our Peace for Sight researchers have recruited over 260 families to our study
- Manar Ismail, Research Assistant, travelled to the

Netherlands in July to learn next-generation sequencing. This has increased the ability to process DNA by up to 1000%

- Dr Alaa Talbishi and Dr Yehya Sweiti, the lead researchers, travelled to several global conferences and have begun collaborating with international retina experts



"My son Fadhi is 12 years old. He started showing issues with his vision five years ago. I have been following up at an independent clinic in Nablus for five years, but they never had any answers to his problems. Since discovering St John it has been such a relief. I finally feel like I am at least getting some answers, instead of costly follow-up appointments with nothing to show for it. Now we have a set plan to follow and the possibility of a genetic diagnosis. It isn't perfect but it is a step in the right direction."

Fadhi (pictured above) suffers from night blindness (very low vision in dark spaces), which often progresses to full blindness. Unfortunately, this particular condition is mostly untreatable, which could ruin his chances of pursuing a career in medicine, as is his wish. This is why our Peace for Sight team are working together to learn more of the condition.

PARTNERSHIPS

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

Technical Support and Grant Partnerships:

There are a number of other development organisations who collaborate with SJEHG on eye health projects across the oPt. We rely on their expertise or influence to deliver our services at the highest level. Several of these bodies are also donors, to see a full list of major donors in 2018 please see page 51).



Training: Partnering with the finest ophthalmic organisations is key to ensuring our staff are the best equipped when tackling preventable blindness in the oPt. We enjoy a strong tradition of training our staff in a number of international organisations.



Local: Our strategic partnerships with local authorities and health networks are vital to ensure an integrated approach to eye health at the ground level. We have a Memorandum of Understanding in place with the Ministry of Health in both the West Bank and Gaza to ensure patients who present with eye conditions at general clinics are referred to us for specialist treatment.



Highlights:

- The London School of Hygiene and Tropical Medicine is partnering with us to conduct our RAAB study
- St John Ophthalmic Association launched in America and Africa
- Winner of the IAPB Photo Competition

International: We are also members of a number of international ophthalmic bodies which enables access and collaboration with a global network of organisations combating preventable blindness.

GLOBAL HEALTH NETWORKS AND ADVISORS:



Accreditation:

Setting the highest quality standards is essential to ensure our patient and staff safety. We are delighted to have been accredited by the gold-standard for the quality of healthcare worldwide. You can read more on our efforts to achieve Quality Eye Care on page 8.

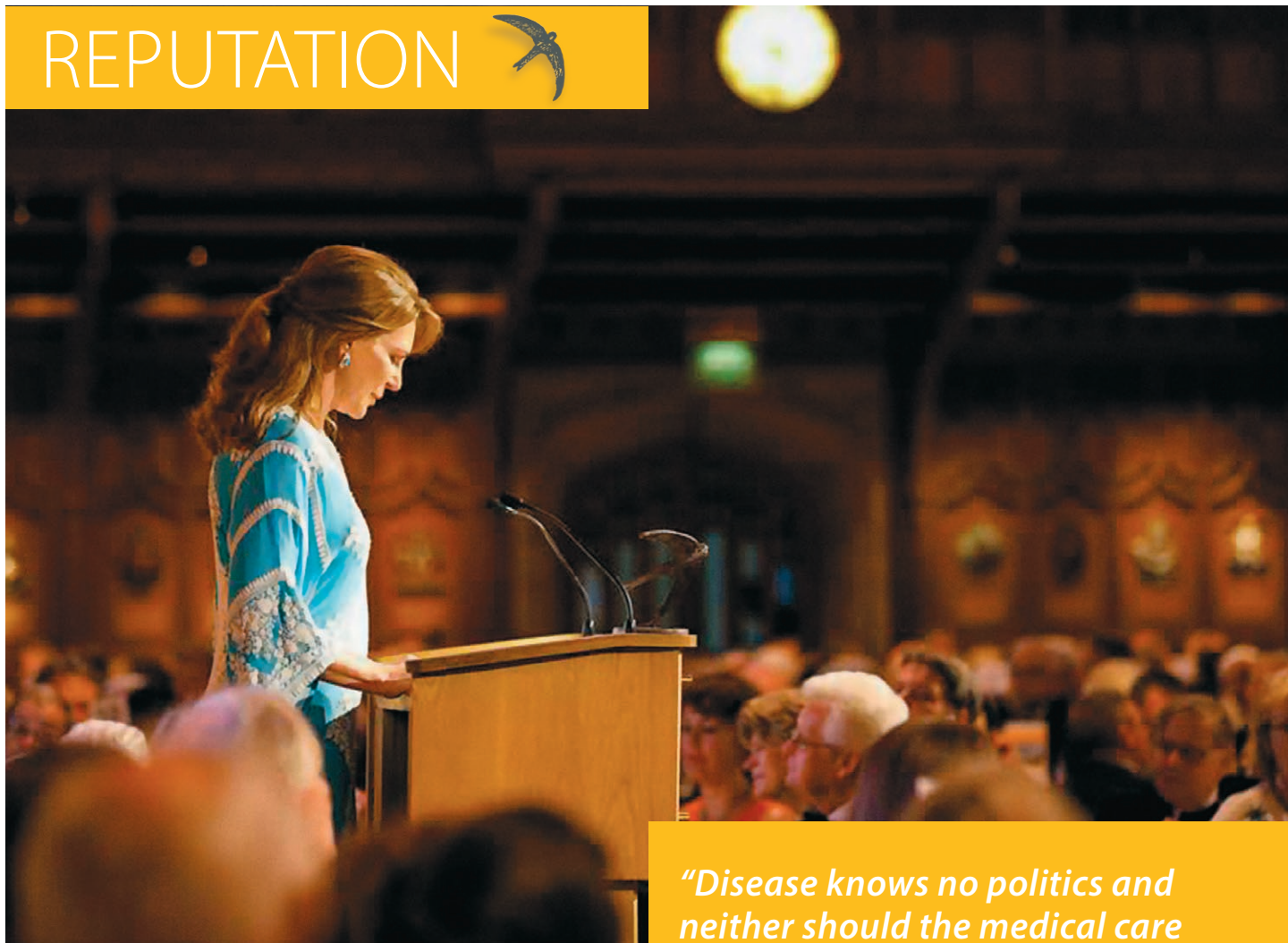


Our Sir Stephen Miller School of Nursing Programme is internationally accredited, ensuring our staff are trained to the highest possible standard.



We take transparency very seriously, following all UK guidelines to ensure both our fundraising and accounting practices are operating to the correct level. As such we are registered with two official charity bodies in the UK and are independently audited each year. To see our full fundraising statement see page 31, to see our Independent Auditor statement from PwC see page 32.





SJEHG, established in 1882, enjoys a unique position as a foundation member of the Most Venerable Order of The Hospital of St John of Jerusalem, which was established by HM Queen Victoria. Our Sovereign Head is HRH Queen Elizabeth II and our Grand Prior is HRH the Duke of Gloucester. Our Royal connection has been reinforced over the years with visits to the hospital from HRH the Duke of Edinburgh and TRH the Duke and Duchess of Gloucester, and in 2018 a visit from HRH the Duke of Cambridge, in the first official Royal visit to the Holy Land in over 70 years (see page 18).

We rely on our reputation as a centre of excellence to enable us to deliver our services further and to a higher standard than anyone else in the region. Regular visits from internationally renowned ophthalmologists benefit both staff and patients alike. Our hospital also benefits from having a diverse Board of Trustees including the British Consul General to Jerusalem, HE Philip Hall OBE.

“Disease knows no politics and neither should the medical care offered to combat it. This is the ethos of St John, reflected in its emphasis on sustainable healthcare, medical training and the empowerment of those in need. These are the genuine building blocks of just and enduring peace.”

– HM Queen Noor of Jordan at the Guildhall, June 2018.

Highlights:

- Our Guildhall Gala Fundraiser was the first major fundraiser for SJEHG in over 4 years and was attended by supporters from across the world, from all faiths and backgrounds. It raised over £617,000 toward our sight saving work
- The first St John Ambassador, Liz Coffey visited for a week and is now representing the hospital to her fellow members at events across Australia. Learn more of this programme on our website

SJEHG is committed to ensuring its sustainability by securing a financially stable future.

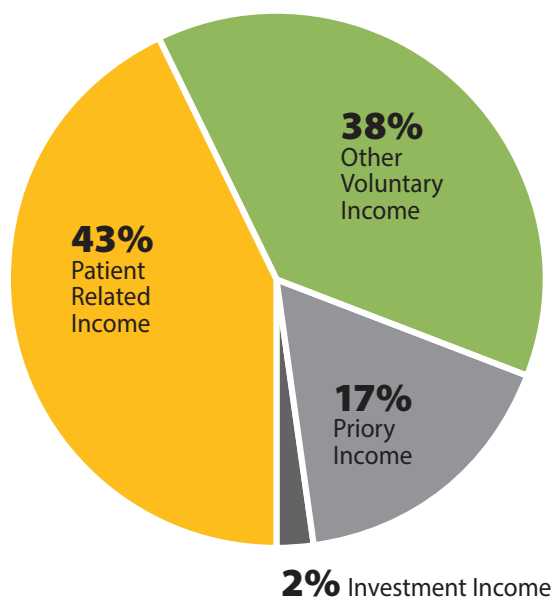
Unfortunately, we are operating in a politically volatile time and this has severely impacted on our finances in the past few years. In October 2018, the US Administration cut \$25m of funding to six East Jerusalem hospitals, of which we are one. This has resulted in an annual loss of funding of around £500,000, which requires us to find alternative sources of comparable levels of funding in future years.

Brexit has caused a sharp depreciation in the Pound Sterling against all currencies, including the Israeli Shekel. The US Dollar is also depreciating against the Israeli Shekel. Since a substantial proportion of our voluntary donations are received in these currencies, the annual cost of these exchange rate movements is around £1 million.

Additionally, political unrest within the region and an international focus on other humanitarian efforts such as the Syrian Refugee Crisis has affected the level of donations received during the year.

Voluntary income continues to be a critical source of funding for our charity. During 2018, funding from our donors amounted to £6,640,000 equating to 55% of incoming resources.

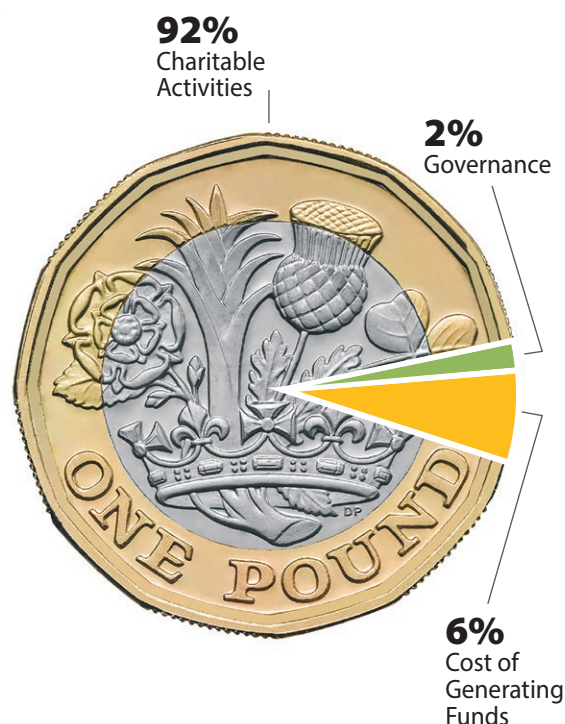
We therefore remain dependent on our many supporters, to whom we are enormously grateful. We hope to achieve more together in 2019.



Statement of Financial Activities

Incoming Resources: £12.1m	£000	\$000	%
Priory Income	2,100	2,803	17
Other Voluntary Income	4,540	6,060	38
Income from charitable activities	5,295	7,067	43
Investment Income	184	246	2
Total	12,119	16,176	

Resources Expended: £11m	£000	\$000	%
Charitable Activities	10,129	13,519	92
Cost of Generating Funds	676	902	6
Governance and Other Expenditure	165	220	2
Total	10,970	14,641	



REPUTATION

Visits from across the World:

We welcome visitors from all of our partner organisations and beyond. If you are interested in our work please get in touch to arrange a visit by emailing danial.omari@sjeh.org.



"This is very peaceful compared to the hustle and bustle of the Old City."

HRH the Duke of Cambridge on the first official British Royal visit to Jerusalem for 70 years, May 2018 (pictured above)



Visits in order of date visited: Lord Mayor of London. Malcom Swenson. David Verity & Family. Paul Cemet & Ryan Williams. Jamie Ingham Clark, Trustee. Ashley Sweetlan. Nicholas Porter. Friends of Sarah Jane Holden-Guild. Mark Coreth. Vic Brandt & group. Janice Gregory. Gregory & Ryan. Dr. Evelyn Lipper, Project Rozana Israel leader, Ronit Zimmer and Dr Khadra Salami from Augusta Victoria Hospital. Dr Bill Speck . Dr Gerald Imber. Sheenah Davies. The Priory of the USA . Hospitaller for the English Priory, Mr James Walsh & two cadets. Bishop Prelate Tim Stevens. John Macaskill, Trustee. The Fellowship Group led by Brigadier John Hemlsey. Lucy Lyon. Rev Andrew Pearson. Mr and Mrs Durlacher. Goya Verity. Dr. Hugh Taylor & Dr. John Forrester. HRH The Duke of Cambridge. Mr and Mrs Vicher. Mr and Mrs Howard. Mr Tim Sotos. Mr Dan Stepaniuk. Institute of Near & Middle in Munich. Mr Owen Sweetman & his partner Rochelle. Mr Steven James, Chairman to MAP & Aimee Shalan, CEO to MAP. Ms Ruth Rosen. Mr James Finklea. Ms Lois Fishman. Mr John G Broughton and friends. Mr Jeff Chambers, Mr David Lawrence and son. Dr John Ferguson Smith, Hospitaller to St John Scotland. Mr William Hernandez. HE Karen Sasahara. Edward Henson, Knights Templar.



"I was extremely impressed by what I saw. In particular, my experience in Gaza is one I shall never forget and I shall remember the staff and patients there particularly in my prayers."

The Order of St John's Prelate, The Right Reverend Timothy Stevens, May 2018 (pictured above)

"I was deeply impressed by the dedication of the Hospital's doctors, nurses and healthcare professionals. Their contribution in difficult circumstances is truly remarkable. It is fantastic that the St John of Jerusalem Eye Hospital continues its long tradition of vital care in the Holy Land."

The Lord Mayor of London, January 2018 (pictured right)





TRUSTEES AND COMMITTEE MEMBERS

Sir Andrew Cash

OBE
(Chairman)

Sir Andrew joined the NHS as a fast track graduate management trainee and has been a chief executive for more than 20 years. He has worked at the local, regional and national level. He has worked by invite at the Department of Health Whitehall on a number of occasions. He is a visiting Professor in Leadership Development at the Universities of York and Sheffield. He is the Vice Chair of the NHS Confederation and Chair of the NHS Employers Policy Board.

Sir Andrew has been Chief Executive of Sheffield Teaching Hospitals NHS Foundation Trust since its inception in July 2004 until July 2018.

He joined the SJEHG Board as Chairman in September 2018.

Mr David H Verity

OStJ MD MA (Oxon) BM BCh
FRCOphth
(Order Hospitaller)

David 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 the complex lacrimal and orbital disease, in addition to thyroid eye 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 and became The Order's Hospitaller in March 2018. David was appointed to the Board in June 2016.

Mr Nicholas Woolf

KStJ OBE
(Former Chairman)

Nicholas Woolf 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. Mr Woolf joined the Board as Chairman in 2012 and retired in January 2018.

Mr Guy Morton

OStJ MA
Acting Chairman
(January - September 2018)

Guy Morton is a solicitor and was, until his retirement, a partner in Freshfields Bruckhaus Deringer LLP, with a practice specialising in banking and financial law and the regulation of financial markets. He was Joint 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 Morton was appointed as Acting Chairman from January 2018 until



L-R: John Macaskill, Maged Abu Ramadan, Nicholas Goulding, Anne Coleman, Guy Morton, Deborah Cash, Sir Andrew Cash, David Verity, Jamie Ingham Clark, Susan Dingwall, Herbert Von Bose, Philip Hall, Nicki Shaw.

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

the appointment of Sir Andrew Cash in September 2018. He first joined the Board in June 2011.

Mr Nicholas Goulding

CStJ BSc FCA CTA (Fellow) ATT
(*Treasurer*)

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 and a Governor of Lord Wandsworth College. He was first appointed to the Board in August 2012.

Dr Maged Abu-Ramadan KStJ MD

FRCSEd

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. Previously, he was the Director General of Hospitals General Administration and the Director General of the International Cooperation Department of the Ministry of Health. Maged became a member of the Board in April 2013.

Dr Anne Coleman

OStJ MD PhD

Dr Anne Coleman is the Hospitalier 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 at 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. Anne has been a member of the Board since June 2014.

Ms Susan Dingwall

OStJ LLM

Susan Dingwall is a partner and General Counsel of the international law firm, Norton Rose Fulbright LLP. Her specialism is insurance and risk management. Prior to being appointed General Counsel, she led the firm's award-winning Islamic insurance practice and is recognised as an expert in her field by Chambers, Legal 500, Euromoney's Expert Guide to Women in Business Law and Euromoney's Expert Guide – Insurance & Reinsurance. Her tenure on the Board has been since August 2011.



HE Philip Hall OBE

Philip Hall has been British Consul General in Jerusalem since August 2017 and joined the Board of Trustees for SJEHG in September 2017. Before this, he led the Spending Review at the Foreign & Commonwealth Office. From 2012 to 2015, he headed the FCO's Counter Proliferation Department, leading the UK Government's work to prevent the spread of chemical, biological and nuclear weapons. He was Defence Counsellor in the UK Delegation to NATO from 2008 to 2012 and headed the FCO's Middle East Peace Process Section from 1999-2001. He is a solicitor, completed postgraduate studies in European law and integration in Germany, and has a Masters in Public Policy from the London School of Economics.

Mr Jamie Ingham Clark CSTJ FCA

Jamie Ingham Clark joined the Board in September 2017, having spent three years as a co-opted member of the finance committee. Jamie is a chartered accountant and his career developed within the London Insurance Market where he has had many years of Board experience both as Finance or Compliance Director. In 2013, he became an elected member of the City of London Corporation and is currently the Deputy for the Ward of Billingsgate. Amongst other committees, he is the Deputy Chairman of its Finance Committee with its responsibility for the City finances. He has also been a member of the Order of St John Ceremonial Staff since 1981, where he is currently Sword Bearer. He is also a Liveryman of the Clothworkers' Company.

Mr John Macaskill OSTJ

John Macaskill is a Founding Partner and Managing Director of Groton Partners, a Private Equity firm based in New York. Mr Macaskill joined Groton Partners in March 2005 and focuses his efforts on alternative investments, including Private Equity. Mr Macaskill is a General Partner in a number of private equity and real estate funds and has spent the last forty years in the financial services industry in New York and London. He serves as a Director to the Edinburgh International Festival American board, Provista Diagnostics, is treasurer of Meadowbrook Golf Club and he is a member (retired) of the Institute of Chartered Accountants of Scotland, and a Chapter Member of the Priory in the United States of the Order of St John. He joined the Board in January 2018.

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. John has been a member of the Board since 2013 and retired from the Board in January 2018.



Our people – SJEHG employs 267 people across our services including 63 medical and allied health professionals and 107 nurses.*

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. Nicki's appointment to the Board was in 2012.

Mr Herbert von Bose

Herbert von Bose is a lawyer and has 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. Herbert joined the Board in June 2014.

Co-opted Committee Members Who Are Not Trustees

○ **Mr Ken Baksh** *Investment*
Mr Baksh is an investment consultant with over 35 years' experience.

○ **Mr Mark Cannon Brookes** *OSTJ Investment*
Mr Cannon Brookes is the Chairman of CG Asset Management Limited.

○ **Prof Mark Compton** *KSTJ AO Fundraising*
Mr Compton is the Chancellor of the Priory of Australia and on the Board of the Order of St John and is Lord Prior Designate.

○ **Sir Vincent Fean** *OSTJ KCVO Fundraising*
Sir Vincent is the former Consul General to Jerusalem and a former Trustee of SJEHG.

○ **Mr Philip Hardaker** *KSTJ FCA Honours & Awards*
Mr Hardaker is a Chartered Accountant and former partner with KPMG, and a former Chairman of SJEHG.

○ **Maj. Gen. Mark Strudwick** *KSTJ CBE Nominations*
Major Strudwick is the former General Officer Commanding Scotland and is Prior of St John Scotland.

○ **Mr Timothy Walker** *CB Audit*
Mr Walker is a retired British Civil Servant, formerly serving as Director General of the Health and Safety Executive.

○ **Mr Douglas L Paul** *KSTJ Nominations*
Mr Paul is a Vice Chairman of Credit Suisse and is Chancellor of the Priory of the USA.

○ **Mr Nigel Graham Heath** *CSJ Finance*
Mr Heath is a businessman, investor and treasurer of the Priory of the USA.

○ **Thomas E.K. Cerruti** *Esq, MSTJ Fundraising*
Mr Cerruti is a lawyer, Executive Director of the Shelley Foundation and member of the Priory of the USA.

○ **Anzo Francis** *Finance*
Anzo Francis is an ICAEW Chartered Accountant and Director of Finance and Operations at London First.

○ **Kevin Custis** *Investment*
Kevin is a registered trust and estate practitioner, Legal Executive and the chair of the London Central Branch of the Society of Trust and Estate Practitioners (STEP).

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, 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, and the risks relevant to achieving these. 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 Articles of Association. New Trustees are selected by the Board to maintain an appropriate balance of diversity, 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 Trustees. The Board of Trustees delegates responsibility for the daily management of the Charity to the Joint Chief Executives, Dr Ahmad Ma'ali and Mr Peter Khoury.

THE CHIEF EXECUTIVES



Dr Ahmad Ma'ali

CStJ PhD MPH BSN PGCE ENB

Joint CEO for Clinical Services. Director of Nursing and Allied Health Professions

Dr Ahmad Ma'ali joined SJEHG in 1990 as a student nurse, cementing his education at Al Quds University, Greenwich University and Moorfields Eye Hospital, as well as being awarded a PhD from De Montfort University - Leicester in 2017. He became Head of our School of Nursing in 2001 and in 2009 became our first Palestinian Nursing Director. He was appointed Joint CEO in October 2017.

Mr Peter Khoury

CStJ BSc CPA

**Joint CEO for Financial and Administrative Affairs
Director of Finance**

Peter Khoury joined SJEHG as Deputy Financial Controller in 2008, and became Financial Controller in 2014. He gained his financial qualifications at North Park University in Chicago where he earned the prestigious 'Who's Who Among Students in American Universities' award for outstanding academic achievement. Peter was an auditor for KPMG, and was Accounts Manager at The Lutheran World Federation / Augusta Victoria Hospital. Peter is also a member of the American Institute of Certified Public Accountants, The Texas Society of Certified Public Accountants, and the Arab Society of Certified Accountants. He was appointed Joint CEO in October 2017.

PUBLIC BENEFIT

The Trustees have given due regard to the Charity Commission's General Guidance on public benefit when planning the Charity's activities. Our 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 by ethnicity, religion, social class or ability to pay.

The Public Benefits from SJEHG's activities are:

- 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 and the Mobile Outreach Programme;
- the exemption of patients' charges when the relevant authority does not finance the treatment and the patient is unable to pay all or part themselves;
- 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;
- the research into endemic diseases affecting the Palestinian population; and
- our services enhance education and employment prospects and contribute to economic growth.



STRATEGIC REPORT:

Strategic Vision

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 on reaching out to as many people as possible, irrespective of ethnicity, religion, social class or ability to pay;
- Making a significant ongoing contribution to national and international research with key partners, Hadassah Medical Center, Aravind Institute and Moorfields Eye Hospital;
- Maintaining its status as the leading and largest charitable eye care provider in the oPt and 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 to continually strengthen standards and protocols on quality care and patient safety. As a leading training facility for ophthalmologists and ophthalmic nurses and a leading provider of care, clinical quality and safety with an 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 2018

For the year ended 31 December 2018, incoming resources amounted to £12.1m, (2017, £10.0m) while resources expended amounted to £11m (2017, £11.2m). This resulted in a surplus of £1.1m (2017, deficit of £1.2m) before taking into account realised and unrealised losses on investments of £0.5m and exchange losses of £0.2m. Overall fund balances accordingly increased by £0.5m in the year.

During the year patient-related income increased due to higher level of activities within the group. Also, we performed more surgeries and introduced more complex surgeries to our Gaza Hospital. Additionally, we opened our new refractive suite in aim to generate more income. Within voluntary income, donations from St John Priors increased from £1.6m in 2017 to £2.1m in 2018.

Expenditure on charitable activities amounted to £10.1m, being 92% of total resources expended. These costs include running the hospitals in Jerusalem, Hebron and Gaza, the Anabta Clinic, the Muristan Clinic and two Mobile Outreach Units, the cost of teaching and training during the year for doctors, nurses and allied health professionals, and the running costs of our newly established genetics laboratory and refractive suite. The expenditure on charitable activities is primarily personnel costs which makes up 57% of the total cost (2017, 61%). Operating costs were contained through the continuation of enhanced cost controls introduced in earlier years.

Costs of generating funds constituted 6% (2017, 6%) of total resources expended and are the costs of the London-based fundraising team and the Jerusalem-based fundraising and projects team in addition to carrying out various fundraising events. Governance costs amounted to 2% (2017, 3%) of the total resources expended and reflect the international nature of the charity's activities and governance arrangements.

Total voluntary income increased to £6.6m (2017, £4.9m) representing 54% (2017, 49%) of the incoming resources. Donations included £1.3m (2017, £0.1m) restricted for capital projects and medical equipment, in addition to £2.1m (2017, £1.6m) donated by the Priors of The Order of St John. Overall, the value of capital projects completed during the year amounted to £0.8m (2017).

Funds generated from charitable activities (mainly patient income) amounted to £5.3m and constituted 43% (2017, 50%) of total incoming resources. The remaining 2% of incoming resources related to income from investments.

During 2018, the PA started transferring a monthly partial payment in place of ad-hoc payments (in the range of 40% of the monthly billings). However, due to the political unrest within the region, and the recent cuts of funding by the US Administration, there are doubts about the ability of the PA to continue paying the hospital on a regular basis. Funding this level of debt impacts on SJEHG's cash flows and it is ameliorated to a certain extent when the European Union pays 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.

Financial Review: Achievements and Performance in 2018

Reserves

At 31 December 2018, SJEHG had total funds of £17.6m (2017, £17.1m). This comprised permanent endowments of £6.7m (2017, £7m), £1.4m (2017, £1.5m) in restricted income funds, and £9.5m (2017, £8.6m) in unrestricted funds, of which £3.2m (2017, £2.4m) 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 considers 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 £6m) to ensure that SJEHG can continue to run efficiently with adequate working capital. It is intended to achieve this through a continuing focus on cost-cutting, revenue generation, the introduction of new sources of revenue, and enhanced fundraising activity in order 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 Israeli Shekel, by changes to the statutory level of minimum wages in Israel, and also by the US Administration's decision to cut \$25m

of funding to East Jerusalem hospitals. SJEHG relies heavily on voluntary income received mainly from donors in the Middle East, Europe, the 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 its working capital needs. 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 exchange gains do not represent realisable income which are capable of being utilised by SJEHG, as they largely reflect the translation into Sterling of the Israeli Shekel value of the Hospital premises.

Operationally, patient and staff access to Jerusalem is crucial to the continuation of our ability to provide eye care services in Palestine. 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 2018 of £2.8m 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 its operations efficiently whilst maintaining a suitable flow of funds to be spent on fulfilling its 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.

Guide to SJEHG's finances

The aim of this note is to summarise the key points to an understanding of the complexities and vulnerabilities of SJEHG's financial position. More detailed information is set out below, but the key features which can obscure the financial difficulties/pressures on the operating budget are–

- capital donations are treated as income (in accordance with the Charities Statement of Recommended Accounting Practice),
- exchange rate variations: these have recently arisen mainly from the depreciation of the Pound Sterling against the operating currency (Israeli Shekel) (which was particularly marked in 2016, when the Brexit vote resulted in a rapid depreciation of almost 20%, but has in fact been a continuous process over at least the last five years), and have also included a depreciation of the US Dollar against the Israeli Shekel,
- The exchange gains or losses apparent from the annual results shown in the financial statements do not represent realisable amounts which are capable of being utilised by SJEHG. They are largely derived from the translation into Pound Sterling of the Hospital premises with an unchanged Shekel valuation.

Table of Adjustments 2018

2018	£'000
Net incoming resources per Statutory Accounts	457
Reconciling Items 2018	
Donations for Capital Projects	(1,300)
Unrealised loss on Investments	531
Exchange Loss	161
Net Operating Results	(151)
Less: Outstanding Restricted Income	(865)
Actual Net Operating Results	(1,016)

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 (including the Strategic Report) and the financial statements in accordance with applicable law and regulation.

Company law requires the Trustees to prepare financial statements for each financial year. Under that law the Trustees have prepared the financial statements in accordance with 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). Under company law the Trustees must not approve the financial statements unless they are satisfied that they give a true and fair view of the state of the 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. In preparing these 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

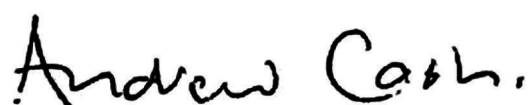
the group and enable them to ensure that the financial statements comply with the Companies Act 2006. They are also responsible for safeguarding the assets of the charitable company and the group and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities.

The Trustees are responsible for the maintenance and integrity of the 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:

- (a) there is no relevant audit information of which the company's auditors are unaware; and
- (b) the Trustees have taken all the steps that he ought to have taken as a trustee in order to make himself aware of any relevant audit information and to establish that the company's auditors are aware of that information.

The Annual Report was approved by the Trustees and signed on their behalf by:



Sir Andrew Cash, Chairman,
St John of Jerusalem
Eye Hospital Group
Company no. 7355619
Charity no. 1139527
20th May 2019

FUNDRAISING STATEMENT



SJEHG as a charity with income or assets over £1m is required to make a statement regarding its fundraising activities in accordance with the Charities Act 2016.

Fundraising activities are carried out on behalf of SJEHG by our own in-house fundraising staff and by volunteer fundraisers. We do not consider volunteer fundraisers to be acting as legal representatives for the charity as we have not formally contracted them to fundraise on our behalf.

Our small team of in-house fundraising staff are fully trained on fundraising regulations and have

been made aware of relevant policy procedures. We ensure that we protect vulnerable persons from unreasonable intrusion into their privacy, persistent approaches or undue pressure to give by using a personal approach to fundraising. We do not use professional fundraisers or commercial participators in any of our activities and we are registered with the Fundraising Regulator.

No complaints were received by SJEHG in relation to its fundraising during the relevant period and, after due enquiry, we are not aware of any breaches of the regulations of the Fundraising Regulator committed by SJEHG.

INDEPENDENT AUDITORS' REPORT TO THE MEMBERS OF ST JOHN OF JERUSALEM EYE HOSPITAL GROUP

Report on the audit of the financial statements

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 2018 and of the group's and parent charitable company'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 (United Kingdom Accounting Standards, comprising FRS 102 "The Financial Reporting Standard applicable in the UK and Republic of Ireland", and applicable law); and
- have been prepared in accordance with the requirements of the Companies Act 2006. We have audited the financial statements, included within the Annual Report (the "Annual Report"), which comprise: the group and parent charitable company balance sheets as at 31 December 2018; the consolidated statement of financial activities, the group income and expenditure account, the consolidated cash flow statement for the year then ended; and the notes to the financial statements.

Basis for opinion

We conducted our audit in accordance with International Standards on Auditing (UK) ("ISAs (UK)") and applicable law. Our

responsibilities under ISAs (UK) are further described in the Auditors' responsibilities for the audit of the financial statements section of our report. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

Independence

We remained independent of the charitable company in accordance with the ethical requirements that are relevant to our audit of the financial statements in the UK, which includes the FRC's Ethical Standard and we have fulfilled our other ethical responsibilities in accordance with these requirements.

Conclusions relating to going concern

ISAs (UK) require us to report to you when:

- the trustees' use of the going concern basis of accounting in the preparation of the financial statements is not appropriate; or
- the trustees have not disclosed in the financial statements any identified material uncertainties that may cast significant doubt about the group's and parent charitable company's ability to continue to adopt the going concern basis of accounting for a period of at least twelve months from the date when the financial statements are authorised for issue.

We have nothing to report in respect of the above matters. However, because not all future events or conditions can be predicted, this statement is not a guarantee as to the group's

and parent charitable company's ability to continue as a going concern. For example, the terms on which the United Kingdom may withdraw from the European Union are not clear, and it is difficult to evaluate all of the potential implications on the company's trade, customers, suppliers and the wider economy.

Reporting on other information

The other information comprises all of the information in the Annual Report other than the financial statements and our auditors' report thereon. The trustees are responsible for the other information. Our opinion on the financial statements does not cover the other information and, accordingly, we do not express an audit opinion or, except to the extent otherwise explicitly stated in this report, any form of assurance thereon.

In connection with our audit of the financial statements, our responsibility is to read the other information and, in doing so, consider whether the other information is materially inconsistent with the financial statements or our knowledge obtained in the audit, or otherwise appears to be materially misstated. If we identify an apparent material inconsistency or material misstatement, we are required to perform procedures to conclude whether there is a material misstatement of the financial statements or a material misstatement of the other information. If, based on the work we have performed, we conclude that there is a material

misstatement of this other information, we are required to report that fact. We have nothing to report based on these responsibilities.

Based on the responsibilities described above and our work undertaken in the course of the audit, ISAs (UK) require us also to report certain opinions and matters as described below.

Strategic Report and Trustees' Annual Report

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 group and parent charitable company and their 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.

Responsibilities for the financial statements and the audit

Responsibilities of the trustees for the financial statements

As explained more fully in the Statement of Trustees' Responsibilities set out on page 30, the trustees (who are also the directors of the charitable company for the purposes of company law) are responsible for the preparation of the financial statements in accordance with the applicable framework and

for being satisfied that they give a true and fair view. The trustees are also responsible for such internal control as they determine is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, the trustees are responsible for assessing the group's and parent charitable company's ability to continue as a going concern, disclosing as applicable, matters related to going concern and using the going concern basis of accounting unless the trustees either intend to liquidate the group and parent charitable company or to cease operations, or have no realistic alternative but to do so.

Auditors' responsibilities for the audit of the financial statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditors' report that includes our opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with ISAs (UK) will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of these financial statements.

A further description of our responsibilities for the audit of the financial statements is located on the Financial Reporting Council's website at: www.frc.org.uk/auditorsresponsibilities. This description forms part of our auditors' report.

Use of this report

this report, including the opinions, has been prepared for and only for the charity's members 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.

Other required reporting

Companies Act 2006 exception reporting

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
- certain disclosures of trustees' remuneration specified by law are not made; 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.



Andrew Lowe

(Senior Statutory Auditor)

For and on behalf of
PricewaterhouseCoopers LLP
Chartered Accountants and
Statutory Auditors
London
20 May 2019

St John of Jerusalem Eye Hospital Group

Financial Statements

Consolidated Statement of Financial Activities for the year ended 31 December 2018

	Notes	Unrestricted Funds 2018 £000	Restricted Funds 2018 £000	Endowment Funds 2018 £000	Total Funds 2018 £000	Total Funds 2017 £000
Income and Endowments						
Donations and legacies	3	1,988	4,652	-	6,640	4,897
Income from charitable activities	4	5,295	-	-	5,295	5,003
Income from investments	8e	61	123	-	184	142
Total Income and Endowments		7,344	4,775	-	12,119	10,042
Resources Expended						
Expenditure on generating funds		(676)	-	-	(676)	(646)
Expenditure on charitable activities		(6,106)	(4,023)	-	(10,129)	(10,234)
Other expenditure		(165)	-	-	(165)	(342)
Total Resources Expended	5	(6,947)	(4,023)	-	(10,970)	(11,222)
Net (losses) / gains on investments	8	(177)	-	(354)	(531)	617
Net Income / (Expenditure)		220	752	(354)	618	(563)
Transfers between funds	12,13	817	(817)	-	-	-
Exchange (losses)/ gains on overseas activities		(161)	-	-	(161)	50
Net Movement in Funds		876	(65)	(354)	457	(513)
Fund balances brought forward at 1 January		8,622	1,490	7,015	17,127	17,640
Fund balances carried forward at 31 December	15	9,498	1,425	6,661	17,584	17,127

All gains and losses recognised in the year are included in the statement of financial activities.
All of the above results are derived from continuing activities.

Group Income and Expenditure Account for the year ended 31 December 2018

	2018 £000	2017 £000
Income	12,119	10,042
Expenditure	(10,970)	(11,222)
Net Income / (Expenditure)	1,149	(1,180)

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

The accounting policies and the notes on pages 37 to 49 form part of these financial statements.

St John of Jerusalem Eye Hospital Group Financial Statements

Balance Sheets

as at 31 December 2018

	Notes	Group 2018 £000	Group 2017 £000	Charity 2018 £000	Charity 2017 £000
Fixed Assets					
Tangible assets	7	6,334	6,273	8	3
Investments	8	11,550	11,905	9,936	10,503
Total Fixed Assets		17,884	18,178	9,944	10,506
Current Assets					
Stocks	9	532	643	-	-
Debtors	10	2,776	2,546	122	216
Cash at bank and in hand		3,424	2,252	1,361	604
Total Current Assets		6,732	5,441	1,483	820
Creditors: Amounts falling due within one year	11	(2,227)	(941)	(20)	(28)
Net Current Assets		4,505	4,500	1,463	792
Total Assets Less Current Liabilities		22,389	22,678	11,407	11,298
Creditors: Amounts falling due after more than one year	11	(4,805)	(5,551)	-	-
Net Assets		17,584	17,127	11,407	11,298
The Funds of the Group and Charity					
Restricted income funds	13	1,425	1,490	510	262
Endowment funds	14	6,661	7,015	6,661	7,015
Unrestricted income funds	12				
Designated funds		6,334	6,273	8	3
Revaluation funds		322	656	322	656
Other general funds		2,842	1,693	3,906	3,362
Unrestricted income funds		9,498	8,622	4,236	4,021
Total Group and Charity Funds	15	17,584	17,127	11,407	11,298

The accounting policies and the notes on pages 37 to 49 form part of these financial statements.

The financial statements were approved by the Trustees on 20 May 2019 and signed on their behalf by:

Andrew Cash

Sir Andrew Cash
Chairman, Board of Trustees

N. Goulding

Nicholas Goulding
Treasurer

St John of Jerusalem Eye Hospital Group

Financial Statements

Consolidated Cash Flow Statement for the year ended 31 December 2018

	Notes	2018 £000	2017 £000
Net cash inflow from operating activities	16	2,527	114
Cash flows from investing activities			
Investment income	8e	184	142
Purchase of tangible fixed assets	7	(1,349)	(552)
Proceeds from disposal of tangible fixed assets		2	-
Purchase of fixed asset investments	8	(397)	(426)
Proceeds from sale of fixed asset investments	8	221	248
Net cash outflow from investing activities		(1,339)	(588)
Foreign exchange differences		(16)	(21)
Change in cash and cash equivalents in the financial year		1,172	(495)
Cash at bank and in hand at 1 January		2,252	2,747
Increase / (Decrease) in cash in the year		1,172	(495)
Cash at bank and in hand at 31 December		3,424	2,252

The accounting policies and the notes on pages 37 to 49 form part of these financial statements.

St John of Jerusalem Eye Hospital Group Financial Statements

Notes to the Financial Statements for the year ended 31 December 2018

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

The Charity's functional and presentational currency is pounds sterling. 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. Exchange differences on the translation of the assets and liabilities of overseas operations are included as Other recognised gains/(losses). All other exchange differences are included as incoming resources or resources expended as appropriate. The exchange rate of the Pounds Sterling to the Israeli Shekel at 2018 year-end was 4.7934 (2017, 4.6819), while the average rate for 2018 was 4.7982 (2017, 4.6345).

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 value 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 Cash flow statement exemption

The Charity has taken advantage of the exemption in FRS 102 from preparing a statement of cash flows, on the basis that it is a qualifying entity and the Group statement of cash flows included in these financial statements includes the cash flows of the Charity.

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.

k Rentals

The costs in respect of 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.

St John of Jerusalem Eye Hospital Group Financial Statements

Notes to the Financial Statements for the year ended 31 December 2018

Principal accounting policies (continued)

I 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.

m 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 £500 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

The holding values and estimated useful lives of assets are regularly reviewed for impairment and where deemed appropriate, are written down.

On disposal of an item of tangible assets, the difference between the disposal proceeds and its carrying amount is recognised in profit or loss within 'Other hospital income'.

n 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 assets investments is recorded on an accruals basis. Market value for unlisted investments is calculated by the fund managers using underlying financial information.

o Liquid resources

Liquid resources are cash, time deposits, and certificates of deposit, in addition to cash at bank and in hand held in current accounts with UK, Israeli and Palestinian Banks.

p 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.

q 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.

General reserves are unrestricted funds available to be used at the discretion of the Board of Trustees for the furtherance of the charitable objectives of the Group and which have not been designated for any other purpose.

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.

Transfers between funds represent tangible assets purchased with restricted donations and used for hospital operations.

r 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 if the revision affects both current and future periods.

Exchange rates are 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 in 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 £000	Restricted £000	2018 Total £000	Unrestricted £000	Restricted £000	2017 Total £000
Donations	1,581	4,609	6,190	1,224	3,494	4,718
Legacies	66	43	109	83	4	87
Donations in kind	341	-	341	92	-	92
	1,988	4,652	6,640	1,399	3,498	4,897

Donations in kind comprise the estimated market value of medical services donated by visiting doctors to the Jerusalem Hospital £3,000 (2017: £18,000), and the value of donated tangible assets and medical supplies £289,000 (2017: £74,000). Income from related parties is set out in note 19. The charity has received no notification of legacy (2017: 1) with an nil estimated value (2017: £15,000) which are not included in legacy income.

St John of Jerusalem Eye Hospital Group

Financial Statements

Notes to the Financial Statements

for the year ended 31 December 2018

4 Income from charitable activities

	2018 £000	2017 £000
Outpatient income	2,300	2,132
Surgical income	3,070	3,085
Less: Patient Relief	(391)	(410)
Net patient related income	4,979	4,807
Other hospital income	43	40
Rental income, board and lodging	273	156
Total other income	316	196
Total income from charitable activities	5,295	5,003

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 2018 £000	Costs of Generating Funds 2017 £000	Charitable Activities 2018 £000	Charitable Activities 2017 £000	Governance Costs 2018 £000	Governance Costs 2017 £000	Total 2018 £000	Total 2017 £000
Personnel costs (note 6)	311	336	5,900	6,334	50	215	6,261	6,885
Recruitment costs	-	-	-	-	11	26	11	26
Medical costs	-	-	2,299	1,422	-	-	2,299	1,422
Establishment costs	73	73	590	657	14	15	677	745
Depreciation (note 7)	4	2	1,139	1,196	-	-	1,143	1,198
Office expenses	30	25	159	191	3	3	192	219
Travel and subsistence	123	129	42	42	-	-	165	171
Marketing and publicity	125	68	-	-	-	-	125	68
Auditors' remuneration	-	-	-	-	61	67	61	67
Other professional fees	5	12	57	35	-	2	62	49
Legal fees	5	1	24	102	30	16	59	119
Other Costs	-	-	-	121	-	-	-	121
Finance costs	-	-	(81)	134	(4)	(2)	(85)	132
	676	646	10,129	10,234	165	342	10,970	11,222
Support costs included above	-	-	1,011	1,266	28	50	1,039	1,316

Total resources expended in 2017 of £11,222,000 comprise £7,653,000 for unrestricted funds and £3,569,000 for restricted funds.

	2018 £000	2017 £000
Support costs comprise:		
Personnel costs	440	429
Recruitment costs	11	26
Establishment costs	305	339
Depreciation	114	120
Office expenses	162	193
Travel and subsistence	42	42
Other professional fees	57	35
Finance costs	(85)	132
	1,076	1,316

	2018 £	2017 £
Auditors' remuneration (excluding VAT):		
External audit	40,963	41,812
Other services provided by external auditors	5,307	649
Sub-total	46,270	42,461
Internal audit	10,851	15,067
	57,121	57,528

St John of Jerusalem Eye Hospital Group

Financial Statements

Notes to the Financial Statements

for the year ended 31 December 2018

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:

	2018 Number	2017 Number
Medical and nursing	176	170
Support services	46	49
Fundraising	17	13
Administration	33	35
	272	267

b Staff costs

	2018 £000	2017 £000
Wages and salaries	5,563	5,978
Social security costs	434	456
Other pension costs	249	247
Other related costs	15	204
	6,261	6,885

Included in other related costs in £nil (2017, £164,000) paid to employees as a compensation for loss of office.

c Emoluments of employees

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

	2018 Number	2017 Number
£270,001 - £280,000 *	-	1
£110,001 - £120,000	-	1
£100,001 - £110,000	2	-
£90,001 - £100,000	-	1
£80,001 - £90,000	1	1
£70,001 - £80,000	1	4
£60,001 - £70,000	2	-

* Includes amount paid as compensation for loss of office.

During the year, provident benefits and pension contributions on behalf of these staff amounted to £10,000 (2017, £13,000).

d Remuneration received by key management personnel

The total remuneration received by the 10 (2017, 14) senior management personnel in managing the operations of the Group amounted to £560,000 (2017, £996,000).

e Pension costs

Pension costs comprise the contributions payable to authorised Israeli money purchase pension schemes in respect of non UK employees and a UK defined contribution retirement benefit scheme in respect of UK based employees.

End of service accrued retirement benefits for non UK employees included in wages and salaries costs are included in the Balance Sheet in Creditors: Amounts falling due within and after more than one year (note 11c).

St John of Jerusalem Eye Hospital Group

Financial Statements

Notes to the Financial Statements

for the year ended 31 December 2018

7 Tangible assets

a Group

	Buildings & Improvements £000	Medical Equipment £000	Motor Vehicles £000	Other Assets £000	Total £000
Cost					
1 January 2018	6,645	7,248	310	2,722	16,925
Additions	208	1,045	-	96	1,349
Exchange differences	(154)	(168)	(7)	(62)	(391)
31 December 2018	6,699	8,125	303	2,756	17,883
Depreciation					
1 January 2018	3,252	5,464	83	1,853	10,652
Charge for the year	277	549	60	257	1,143
Exchange differences	(75)	(127)	(1)	(43)	(246)
31 December 2018	3,454	5,886	142	2,067	11,549
Net Book Value					
31 December 2018	3,245	2,239	161	689	6,334
31 December 2017	3,393	1,784	227	869	6,273

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

b Charity

	Other Assets £000	Total £000
Cost		
1 January 2018	49	49
Additions	9	9
31 December 2018	58	58
Depreciation		
1 January 2018	46	46
Charge for the year	4	4
31 December 2018	50	50
Net Book Value		
31 December 2018	8	8
31 December 2017	3	3

St John of Jerusalem Eye Hospital Group Financial Statements

Notes to the Financial Statements for the year ended 31 December 2018

8 Investments

a Analysis of movements (Group)

	Bank Deposits £000	Listed Investments £000	Total £000
Market value at 1 January 2018	1,307	10,598	11,905
Additions	141	256	397
Withdrawals	-	(221)	(221)
Unrealised (losses)	-	(531)	(531)
Market value at 31 December 2018	1,448	10,102	11,550
Historical cost at 31 December 2018	1,448	9,860	11,308

In 2017, unrealised gains of £617,000 comprise £208,000 for unrestricted funds and £409,000 for endowment funds.

b Analysis of movements (Charity)

	Listed Investments £000	Total £000
Market value at 1 January 2018	10,503	10,503
Additions	184	184
Withdrawals	(221)	(221)
Unrealised (losses)	(530)	(530)
Market value at 31 December 2018	9,936	9,936
Historical cost at 31 December 2018	9,681	9,681

c Listed investments:

Analysis by category of underlying holding and location

		2018 Group £000	2018 Charity £000	2017 Group £000	2017 Charity £000
Equity investments	- UK	2,734	2,734	3,110	3,110
	- Overseas	2,957	2,957	3,214	3,214
Fixed interest securities	- UK	671	671	282	282
Property Unit Trusts	- UK	1,139	1,139	515	515
Property Unit Trusts (unlisted)	- Europe	3	3	5	5
Alternative Investments	- UK	484	484	1,362	1,362
Sterling & Cash Instruments	- UK	1,948	1,948	2,015	2,015
Others	- Overseas	166	-	95	-
Market value of listed investments		10,102	9,936	10,598	10,503

At 31 December 2018, the following pooled funds represented each more than 4% of the total investment portfolio:

Group & Charity	2018 %	2017 %
Fidelity Global Dividend Fund	10.6	-
Schroders QEP Global Active Value Fund	9.7	9.9
Charities Property Fund	8.7	1.0
Schroder Income Fund	8.6	8.3
Vanguard S&P 500 UCITS ETF	6.9	9.8
Trojan Income Fund	6.3	-
Majedie UK Equity Fund	5.9	6.3
Aberdeen UK All Share Tracker Fund	5.5	5.8
Property Income Trust for Charities	5.5	4.9
Vontobel Fund	5.1	-
Merian UK Alpha Fund	4.3	-

St John of Jerusalem Eye Hospital Group

Financial Statements

Notes to the Financial Statements

for the year ended 31 December 2018

8 Investments

d Bank deposits

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

e Income from investments

	2018 £000	2017 £000
Unrestricted funds	61	47
Restricted funds	123	95
	184	142

f 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 financial information for the subsidiary entities:

	St. John Eye Hospital in Jerusalem (RA) 2018 £'000	St. John of Jerusalem Eye Hospital 2018 £'000
Total income and endowments	7,226	2,551
Total resources expended	(8,193)	(2,264)
Net (outgoing)/incoming resources before other recognised gains	(967)	287
Other recognised (losses) / gains	(101)	(62)
Net movements in funds	(1,068)	225
Total assets	9,356	4,218
Total liabilities	(5,474)	(1,760)
Total funds	3,882	2,458

9 Stocks

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

10 Debtors

a Amounts falling due within one year

Note	Group 2018 £000	Group 2017 £000	Charity 2018 £000	Charity 2017 £000
Trade debtors	2,484	2,065	-	-
Allowance for bad debts	(155)	(144)	-	-
Net trade debtors	2,329	1,921	-	-
Donations receivable	344	500	110	192
Prepayments and accrued income	103	125	12	24
Total debtors	2,776	2,546	122	216

St John of Jerusalem Eye Hospital Group

Financial Statements

Notes to the Financial Statements

for the year ended 31 December 2018

10 Debtors (continued)

b Movement in allowance for bad debts

	Group 2018 £000	Group 2017 £000
1 January	144	125
Additions	305	378
Write off *	(290)	(360)
Exchange differences	(4)	1
31 December	155	144

* 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.

11 Creditors

a Amounts falling due within one year

	Note	Group 2018 £000	Group 2017 £000	Charity 2018 £000	Charity 2017 £000
Trade creditors		498	260	5	6
Retirement benefits	11 c	1,078	21	1	2
Taxation and social security		70	78	-	6
Accruals		474	472	14	14
Deferred income	11 b	54	57	-	-
Holiday pay accrual		53	53	-	-
		2,227	941	20	28

b Deferred income

	Group 2018 £000	Group 2017 £000
1 January	57	50
Deferred income recognised	173	146
Deferred income released	(175)	(139)
Exchange differences	(1)	-
31 December	54	57

c Amounts falling due after more than one year

	Group 2018 £000	Group 2017 £000	Charity 2018 £000	Charity 2017 £000
Retirement benefits				
1 January	5,551	4,780	-	-
Additions	741	899	-	-
Exchange differences	(127)	437	-	-
Transferred to amounts falling due within one year	(1,078)	-	-	-
Payments	(282)	(565)	-	-
31 December	4,805	5,551	-	-

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.

St John of Jerusalem Eye Hospital Group

Financial Statements

Notes to the Financial Statements

for the year ended 31 December 2018

12 Unrestricted Income Funds

	1 January 2018	Incoming Resources	Resources Expended	Transfers	Gains & Losses	31 December 2018
	£000	£000	£000	£000	£000	£000
Group						
General reserves	1,693	6,812	(5,804)	-	141	2,842
Designated funds: Tangible fixed assets	6,273	532	(1,143)	817	(145)	6,334
Revaluation reserve	656	-	-	-	(334)	322
Total unrestricted funds	8,622	7,344	(6,947)	817	(338)	9,498
Charity						
General reserves	3,362	2,342	(1,956)	-	158	3,906
Designated funds: Tangible fixed assets	3	9	(4)	-	-	8
Revaluation reserve	656	-	-	-	(334)	322
Total unrestricted funds	4,021	2,351	(1,960)	-	(176)	4,236
	1 January 2017	Incoming Resources	Resources Expended	Transfers	Gains & Losses	31 December 2017
	£000	£000	£000	£000	£000	£000
Group						
General reserves	2,057	6,076	(6,458)	-	18	1,693
Designated funds: Tangible fixed assets	6,848	373	(1,195)	176	71	6,273
Revaluation reserve	487	-	-	-	169	656
Total unrestricted funds	9,392	6,449	(7,653)	176	258	8,622
Charity						
General reserves	4,733	1,794	(3,202)	-	37	3,362
Designated funds: Tangible fixed assets	5	-	(2)	-	-	3
Revaluation reserve	487	-	-	-	169	656
Total unrestricted funds	5,225	1,794	(3,204)	-	206	4,021

Transfers represent amounts released from restricted funds for the purchase of tangible fixed assets.

St John of Jerusalem Eye Hospital Group

Financial Statements

Notes to the Financial Statements

for the year ended 31 December 2018

13 Restricted Income Funds

	1 January 2018	Incoming Resources	Charitable Activities	Purchase of Tangible Fixed Assets	31 December 2018
	£000	£000	£000	£000	£000
Charity					
Staff sponsorship	-	726	(726)	-	-
Outreach	42	2	(44)	-	-
West Bank and Gaza Facilities	-	17	(17)	-	-
Other capital projects	61	515	-	(246)	330
Patient relief	50	111	(160)	-	1
Income received from endowments	-	123	(123)	-	-
Other projects	102	245	(175)	-	172
Others value less in each case than £25,000	7	19	(19)	-	7
Total Charity	262	1,758	(1,264)	(246)	510
Capital projects	181	619	-	(571)	229
Other projects	1,020	2,346	(2,692)	-	674
Others value less in each case than £25,000	27	52	(67)	-	12
Total Group	1,490	4,775	(4,023)	(817)	1,425

	1 January 2017	Incoming Resources	Charitable Activities	Purchase of Tangible Fixed Assets	31 December 2017
	£000	£000	£000	£000	£000
Charity					
Staff sponsorship	64	745	(809)	-	-
Outreach	50	58	(66)	-	42
West Bank and Gaza Facilities	-	33	(33)	-	-
Other capital projects	-	62	-	(1)	61
Patient relief	53	49	(52)	-	50
Income received from endowments	-	95	(95)	-	-
Other projects	131	97	(122)	(4)	102
Others value less in each case than £25,000	24	37	(54)	-	7
Total Charity	322	1,176	(1,231)	(5)	262
Capital projects	311	41	-	(171)	181
Other projects	984	2,326	(2,290)	-	1,020
Others value less in each case than £25,000	25	50	(48)	-	27
Total Group	1,642	3,593	(3,569)	(176)	1,490

St John of Jerusalem Eye Hospital Group

Financial Statements

Notes to the Financial Statements

for the year ended 31 December 2018

Charity

- Staff sponsorship represents funds received to cover or contribute to staff costs of 42 hospital staff.
- Outreach funds cover the running costs of three outreach units.
- West Bank and Gaza facilities fund contribute to cover the operating costs of the Gaza Hospital, Hebron Hospital and Anabta Clinic.
- Capital projects funds represent funds received from various UK Trusts and Middle East donors to establish refractive suite and purchase medical equipment for the Group.
- 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 establish a refractive suite and purchase medical equipment for the Group.
- Other projects include donations received to expand the level of operations within the Gaza Hospital through the introduction of Diabetic Retinopathy screening and epidemiological research components. Also, it includes funds received to establish a genetic research unit and a lab at the main hospital in Jerusalem as well as funds received to sustain our services at the newly established Muristan Clinic in the Old City of Jerusalem.

14 Endowment Funds

Group and Charity

	1 January 2018 £000	Investment Losses £000	31 December 2018 £000
American Society of St John: Walsh Bequest	506	(26)	480
Bed Endowment	4,112	(208)	3,904
Frost Charitable Trust	553	(28)	525
Frost Nursing School	523	(26)	497
Mr. Owen Smith Endowment	111	(5)	106
The John Swire Foundation Endowment	1,210	(61)	1,149
	7,015	(354)	6,661

	1 January 2017 £000	Investment Gains £000	31 December 2017 £000
American Society of St John: Walsh Bequest	476	30	506
Bed Endowment	3,872	240	4,112
Frost Charitable Trust	521	32	553
Frost Nursing School	492	31	523
Mr. Owen Smith Endowment	105	6	111
The John Swire Foundation Endowment	1,140	70	1,210
	6,606	409	7,015

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.

15 Total Group and Charity Funds

	Unrestricted Funds 2018 £000	Unrestricted Funds 2017 £000	Restricted Funds 2018 £000	Restricted Funds 2017 £000	Endowment Funds 2018 £000	Endowment Funds 2017 £000	Total Funds 2018 £000	Total Funds 2017 £000
a Analysis by type of asset and liability (Group)								
Tangible assets	6,334	6,273	-	-	-	-	6,334	6,273
Investments	4,889	4,890	-	-	6,661	7,015	11,550	11,905
Net current assets	3,080	3,010	1,425	1,490	-	-	4,505	4,500
Creditors: Amounts falling due after more than one year	(4,805)	(5,551)	-	-	-	-	(4,805)	(5,551)
	9,498	8,622	1,425	1,490	6,661	7,015	17,584	17,127
b Analysis by type of asset and liability (Charity)								
Tangible assets	8	3	-	-	-	-	8	3
Investments	3,275	3,488	-	-	6,661	7,015	9,936	10,503
Net current assets	953	530	510	262	-	-	1,463	792
	4,236	4,021	510	262	6,661	7,015	11,407	11,298

St John of Jerusalem Eye Hospital Group

Financial Statements

Notes to the Financial Statements for the year ended 31 December 2018

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

	2018 £000	2017 £000
Net incoming resources	1,149	(1,180)
Investment income	(184)	(142)
(Gain) on disposal of tangible fixed assets	(2)	-
Depreciation	1,143	1,198
Decrease / (Increase) in stocks	111	(179)
(Increase) / Decrease in debtors	(230)	105
Increase in creditors	540	312
Net cash inflow from operating activities	2,527	114

17 Financial Instruments

	Group 2018 £000	Group 2017 £000	Charity 2018 £000	Charity 2017 £000
Financial assets at fair value through statement of financial activities				
Investments	11,550	11,905	9,936	10,503
Financial assets that are debt instruments measured at amortised cost				
Stocks	532	643	-	-
Debtors	2,776	2,546	122	216
Cash at bank and in hand	3,424	2,252	1,361	604
	6,732	5,441	1,483	820
Financial liabilities that are debt instruments measured at amortised cost				
Trade creditors	498	260	5	6
Taxation and social security	70	78	-	6
Accruals	474	472	14	14
Deferred income	54	57	-	-
Holiday pay accrual	53	53	-	-
Retirement benefits	5,883	5,572	1	2
	7,032	6,492	20	28

St John of Jerusalem Eye Hospital Group

Financial Statements

Notes to the Financial Statements

for the year ended 31 December 2018

18 Trustees' remuneration

The trustees receive no remuneration.

Reimbursement of trustees' expenses for travel, accommodation and flights for 12 trustees (2017, 11) during the year amounted to £34,573 (2017, £28,796).

Donations made by trustees amounted to £69,207 (2017, £26,629).

Charity Trustee Indemnity insurance is provided at a cost of £5,787 (2017, £6,841) to cover the charity, trustees and officers against potential claims and losses.

19 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 peppercorn 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.

Additionally, £13,560 was paid to the City of London to rent the Guildhall for St John's 2018 gala dinner. One of our trustees is also the Deputy Chairman of the City of London Finance Committee. Thus, it is considered a related party transaction for our purposes.

During the year, the Chairman of the Charity, Sir Andrew Cash, was also a trustee of The Most Venerable Order of the Hospital of St John of Jerusalem.

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

Priory	2018 £000	2017 £000
USA	1,331	782
England and the Islands	254	337
Scotland	74	102
New Zealand	84	141
Australia	209	121
Canada	116	37
Wales	10	15
	2,078	1,535
Other Members of St. John Family	2018 £000	2017 £000
Sweden	22	20
Johanniter Orde in Nederland	-	2
Singapore	-	3
	22	25
Donations by the Priory of the United States:	2018 £000	2017 £000
Hospital - General Support	539	637
Hospital Restricted Gifts	249	71
USAID / ASHA Hospital Restricted Grant	543	74
	1,331	782

During the year, the Charity reimbursed the Priory of England and the Islands and the Order of St John £2,905 (2017, £3,835) in respect of certain expenses incurred. Outstanding donations from the Priors and Establishments of the Order of St John at 31 December 2018 amounted to £233,866 (2017, £336,998).

Contractual & designated obligations

In 2018, the Group implemented a project that aims at expanding the level of operations within the Gaza branch through the introduction of Diabetic Retinopathy screening and epidemiological research components. The Group received £502,000 and expensed £387,000 on related activities.

In 2018, the Group operated a genetic research unit and lab at the main hospital in Jerusalem, funded by the European Union's Peacebuilding Initiative and is in partnership with Johanniter and Hadassah Medical Center through training and technical capacity development.

In 2018, the Group established a corneal suite and a private clinic at the main hospital in Jerusalem funded by USAID/ASHA, The Linbury Trust, and The Knights Templar. The Group received £815,000 and expensed £743,000 on this project.

At 31 December 2018, there is £163,000 contracted in relation to the purchase of medical equipment for the refractive suite (2017, £920,000).

ST JOHN OF JERUSALEM EYE HOSPITAL GROUP

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**Bankers in the occupied
Palestinian territories**
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Bethlehem

Investment Managers
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Gategny Esplanade
St Peter Port
Guernsey GY1 3UF

Independent Auditors
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St John of Jerusalem Eye Hospital Group (a UK Company Limited by guarantee, Company number 7355619, Charity number 1139527) 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 Desrescent and an increscent Vert throughout and charged with a Maltese Cross Argent.



The Sir Stephen Miller School of Nursing Graduation Class of 2018.

As a foundation 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.

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 2018. The St John Pories from around the world have once again delivered much-valued assistance to SJEHG and we thank them for their continued 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 2018:

HM Queen Noor of Jordan
Arab Fund for Economic and Social Development
The Anthony & Elizabeth Mellows Charitable Trust
Mr Nadhmi & Mrs Ibtisam Auch
Australian Representative Office to the Palestinian Authority - The Direct Aid Program (DAP) Australia
Mr James Aumonier
The Balcombe Charitable Trust
The Bishop's Waltham Garden Fair
The British Humane Association
The Bryan Guinness Charitable Trust
Mr Chris Bake
Mrs Maggie Burgess
The Cadogan Charity
CBM
CHK Charities Limited
Children Of Peace
The Clothworkers' Foundation
Consolidated Contractors Company
Mr Michael Dan
Dana Foundation
The David & Ruth Lewis Family Charitable Trust
The Dumetum Trust
The European Union - Peacebuilding Initiative
The Edwina Mountbatten & Leonora Children's Foundation
Mr Karim El-Akabi
The Federal Ministry of Economic Cooperation and Development -BMZ
The Fred Hollows Foundation
The George E. Coleman Foundation
The German Ministry of Foreign Affairs
Mrs Caroline Gavin (In Memory of A Gavin)
Mr Peter Goltra
Mr Paul Gwilliam

Mr Nigel Heath
Holland Lodge Foundation
Islamic Development Bank
Johanniter-Unfall-Hilfe e.V.
The Linbury Trust
Lions Club International Foundation (LCIF)
The Kadoorie Charitable Foundation
The Knights Templar
Jordan Hashemite Charity Organization
Legacy of Margaret Lennon
Miss Denise Magauran
Mr Timothy Mattar
The MBC Heritage of Islam Trust
Mr Saad Naji
Mrs Patricia O'Donnell
The Park House Charitable Trust
Mr Mark Pigott
Project Rozana
The Legacy of Diana Rogerson
Dame Theresa Sackler
Mr Roy and Mrs Eva Strasburger
The Sobell Foundation
The Sovereign Military Order of Malta
Mrs Catherine Stevenson
The John Swire 1989 Charitable Trust
The Thriplow Charitable Trust
The Ulverscroft Foundation
The Ridley Foundation
USAID - American Schools and Hospitals Abroad (ASHA)
Mr Robert Waddingham
Welfare Association - Taawon
Mr Robert Wilson
(In Memory of his daughter Olivia Marie Wilson)
The Valentine Charitable Trust
Mrs Heba Zaphiriou-Zarifi
And other anonymous donors.

St John Funding 2018



Australia: £209,000 Canada: £116,000 England and the Islands: £254,000
New Zealand: £84,000 Scotland: £74,000 USA: £1,331,000 Wales: £10,000
Johanniter Sweden: £22,000



Australia: \$279,000 Canada: \$155,000 England and the Islands: \$339,000
New Zealand: \$112,000 Scotland: \$99,000 USA: \$1,776,000 Wales: \$13,000
Johanniter Sweden: \$29,000



**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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