

# Jerusalem Scene

The Newsletter of the St John of Jerusalem Eye Hospital Group



# 12

Spring Edition

## A New Start for Gaza

**As we celebrate the beginning of spring in this edition of Jerusalem Scene, we look forward to a new Day Care Hospital for Gaza and revel in record attendances of over 107,000 in 2011.**

Hospital Trustee and Chairman of VISION 2020 UK, Mr Nick Astbury, makes a welcome first contribution to Jerusalem Scene as he examines the best method of treating cataracts. We also take an updated look at our Joint Training Programme.

Finally, we bid farewell to London head, Nicky Wynne, and welcome not one, but two new Chairs to the Guild.



(Photo courtesy Miss Denise Magauran)

## Gaza Capital Appeal 2012-2014

### Ghetto project gets Green Light!

**In the Winter 2011 edition of Jerusalem Scene, we reported that we had taken possession of a plot of land in the University District of Gaza City, upon which the intention is to build a replacement Day Hospital and Clinic for Gaza.**



Rod Bull stands on plot of land earmarked for Gaza build

It is currently estimated that we will need to raise in excess of £1.68m (\$2.66m) between now and 2014 in order to realise this much needed project.

An international fundraising campaign has already begun from our offices in Jerusalem and this will intensify in the near future. Now, we would like to ask you, our Jerusalem Scene readers, to dig deep into your pockets and make any contribution you can towards this important appeal.

It is the fundamental mission of the St. John of Jerusalem Eye Hospital Group to deliver eye care to all who need it in the Holy Land, regardless of their ability to pay. The people of Gaza – more than any other – need our help!

Despite a moderation in the blockade of Gaza in 2010, the ban on the import of construction materials remains in place. The only materials formally sanctioned are for specific UN developments, such as schools.

Although unemployment has fallen, one out of every three is still without work and, in

an October 2011 report, *Coping with Conflict: Poverty and Inclusion in the West Bank and Gaza*, The World Bank cited figures of 33.7% of the Gazan population living in poverty and 19.9% living in deep poverty.

The report stated that the closure of Gaza has, "constrained growth, investment and consequently job creation that is essential for a young and highly educated population."

Don't forget that, in Gaza, 43.9% of the population is under the age of 14, while 92.4% is literate. (CIA World Factbook, 2011).

Since opening in 1992, our clinic in Gaza City has been enormously important to us – as well as to the people of Gaza, where attendances in 2011 rose to over 22,000 for the first time.

Though the clinic and its dedicated staff have struggled through

some exceedingly demanding times, we have continued to see and treat patients. Now, sadly, we are no longer the major provider of eye care in the Gaza Strip. Other, better funded and better equipped units have eclipsed us.

This is no surprise. Year on year, the contained and rapidly growing population of Gaza gives rise to increased numbers requiring services. Currently, around 100 to 120 patients attend our clinic every day – this figure does not include relatives accompanying patients – and the current space is cramped and totally inadequate.

The appointment of new Gaza Clinic Director, Dr Kamal Okasha, in January 2011 transformed the previously run down clinic into a clean and vibrant department in which the staff were bursting with optimism for the future. Indeed, for his outstanding work rehabilitating the clinic,

Dr Okasha was presented with the Hospital Group's Magauran Cup – awarded to the doctor within the Group who has contributed most to its medical services – in a ceremony held at the Jerusalem Hospital in September last year.

Dr Okasha's obviously adroit presence in Gaza only makes the need to expand and improve our medical and surgical service provision there all the more imperative.

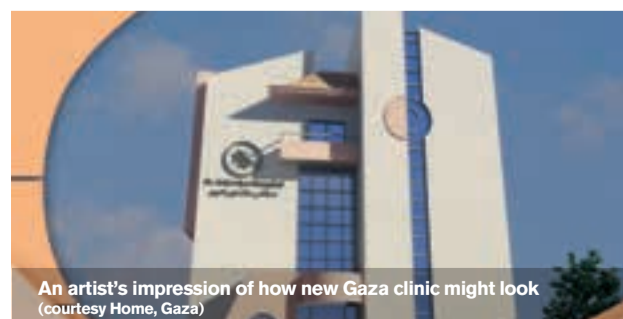
Our intention is to create a purpose-built day care facility that will re-establish St John as a major contributor to eye care in the Gaza Strip.

In addition to securing the 700sq metre plot upon which to build, we already have much of the medical equipment that will be required. This has been donated by the USAID/ Flagship project.

We now have to raise the funding to proceed with this momentous and exciting capital project.

As always, if you would like to make a donation towards the Gaza build, you can do so by filling in the donation form at the back of this edition or by logging onto the website at [www.stjohnseyehospital.org](http://www.stjohnseyehospital.org)

Thank you.



An artist's impression of how new Gaza clinic might look (courtesy Home, Gaza)



## Thoughts from our Chief Executive

### Gaza: The Strategic Plan

#### Some 20 years have passed since the opening of our rented Clinic facilities in Gaza City

Back then we were dealing with 8,000 outpatients and performing 160 major operations. By 2011, our clinical staff treated in excess of 22,000 outpatients and performed 950 major surgical procedures – quite an achievement. What makes this success even more surprising is that it has been accomplished in far from ideal, cramped

premises. For some time we have been acutely aware that we are failing in providing an adequate standard of clinical accommodation to meet the ever increasing demands and stresses that we are faced with on a daily basis. A new facility is a high priority in our Board approved Strategic Plan 2011 – 2014.

Being sympathetic to our future needs, the Palestinian Land Authority has generously made available a plot in the University District of Gaza, which we will rent and upon which we can develop a purpose-built Day Hospital/ Outpatient Clinic. This is long overdue and we recently took custody of the site. However, a requirement of our tenure is that we need to actively commence building within the next six months!

**Through vigilant budgeting we have**

**made available funds to engage a healthcare experienced architect with whom we are working to develop the outline layout plans. Early indicators are that we will, in total, require around £1.68 million to achieve our goal!**

Our fundraising teams in both London and Jerusalem will be working harder than ever

to help raise the necessary capital. Quite a daunting task but I have every confidence we will be successful – failure is a word not included in our dictionary or present in our thoughts.

We need your continuing support more than ever. Any donation, small or large, will help us to further our work.

Chief Executive Officer,  
Rod Bull

## Farewell to Nicky Wynne

### Head of London Office Moves On



**It was with great sadness that we all said goodbye to Nicky Wynne at the end of November last year.**

Nicky had been Head of Fundraising and Marketing at the St John Eye Hospital Group London office since October 2007 and presided over a grand total of £5.6m coming into the office during that time.

After four years with SJEHG, she has taken up the position of International Development Director at Mission to Seafarers, a charity founded in 1856, which provides help and support to 1.2 million British merchant seafarers around the world.

In 2007, Nicky was brought on-board to head a new, contemporary fundraising and marketing team in London, combining all of the potential fundraising avenues that most charities now make use of. Although her team was always small, Nicky transformed the London operation into a successful and modern fundraising enterprise.

Upon the retirement of Sylvia Holmes in 2010, Nicky took over responsibility for co-ordinating the St John Priors' sponsorship of SJEHG staff and became even more of a well-known figure throughout the Order of St John. In 2011, she organised and managed



Nicky Wynne with Alex Burrough, Lisa Smith, Dominic Hasan, Feryal Awan and Geof Jarvis at Charterhouse Mews

the Patron's Reception at Charterhouse, the former Carthusian monastery and current almshouse just round the corner from our London hub. The 2011 reception was one of our most successful, raising over £25,000 net.

Upon hearing of Nicky's intention to move on, the Lord Prior of the Order, Professor Anthony Mellows, wrote: "You have certainly developed fundraising to a very significant degree during your time with the Hospital."

**Nursing Director, Ahmad Ma'ali wrote, "It has been my pleasure to work with such a visionary, professional lady, who has given all to the Hospital."**

Nicky joined the team at SJEHG from the Architectural Association School of Architecture, where she was Development Director. Previously, she had been Fundraising & Sponsorship Manager for The Teaching Awards Trust.

**In 2011, Nicky was honoured by Her Majesty The Queen by being admitted to The Order of St John in the grade of 'Serving Sister', for outstanding service to The St John of Jerusalem Eye Hospital Group.**



Dr Kamal Okasha receives the Magauran Cup from Nick Astbury Sept 23 2011 (Ghassan Isaac and Philip Hardaker are in the background)

## The State of Play

### A brief word from Philip Hardaker



**The Hospital Group enters 2012 in good shape. Outpatient numbers and operations during 2011 exceeded the record levels of 2010.**

Although volumes are an important measure, quality and focus are essential to the longer term development of the Hospital Group. Increases in cataract operations –

despite a continued reduction in Palestinian Ministry of Health referrals – and argon laser treatments for diabetes are in line with our strategic priorities. With strong teamwork this level of increased activity has been achieved within our existing staffing levels.

Gaza and Anabta have been particularly busy and in both locations we have outgrown our existing facilities. In previous editions we have referred

to our longer term plans for Gaza. The challenge now is to convert our plans into a funded construction project. In the meantime we have secured additional space to enable us to create a diagnostic centre with equipment donated by USAID. In Anabta, we are hopeful that, with the support of the Palestinian Red Crescent Society, we shall occupy the long promised and much needed additional space at our clinic there later this year.

With support from another USAID programme, we are now in a position to fit out the new Medical Retinal Unit in Jerusalem with the latest equipment. Funding is also in place to upgrade the main operating theatres when we can release them from essential daily use. We are also well advanced in discussions to create a day case operating facility and to separate the women and children's wards. With advances in ophthalmic practice this is all possible within the historic ward space.

It is gratifying to report that the Hospital has recently passed its annual Israeli Ministry of Health inspection with no major issues being raised. The standard of care that we have offered over the years and continue to offer is deservedly well respected in the communities which we serve.

**We continue to work with a number of potential partners to fund a sustainable programme of screening for diabetic retinopathy. We are hopeful that we may be able to commence a pilot later in the year.**

At the end of 2011, we received a financial bonus in the form of a substantial donation from within the Middle East. This will provide us with the resources to seed fund a number of projects within our strategic plan as well as supplementing

our Patient Relief Fund, which have been under pressure with the increasing number of refugee status referrals through UNRWA.

Mention is made elsewhere of the departure of Nicky Wynne at the end of last year. We shall miss her contribution and are very grateful for the effort that she put in to increase the profile of the Hospital Group and to widen our supporter base.

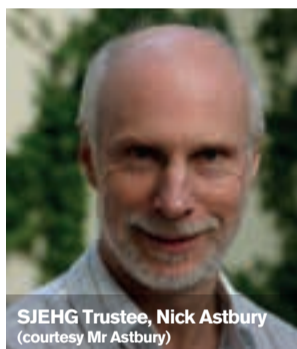
During 2011 we commissioned a study to assess the feasibility of substantially increasing our fundraising targets to enable us to expand our activities in line with our Strategic Plan. In December 2011 the Board approved the proposition put forward by the consultants and over the next few months we shall be implementing the planning phase and commencing activity.

Philip Hardaker,  
FCA Chairman

# The Challenge of Cataract Surgery in the oPt

## Why phacoemulsification, and why is it so costly?

**In the oPt, as in much of the developing world, cataract remains the leading cause of preventable blindness.**



SJEHG Trustee, Nick Astbury (courtesy Mr Astbury)

Around the world, there are well-established surgical techniques for removing the opaque cataractous lens and inserting a plastic 'implant' – or intra-ocular lens – but the challenge is to operate on as many people as possible, in the most cost-effective way and this is not so straightforward in practice.

Firstly, it is necessary to have skilled teams of doctors and nurses; secondly, facilities, which include a fully equipped, sterile operating room and instrumentation; lastly, the patients have to be able to get to the hospital and attend follow-up appointments.

At SJEHG, we are fortunate to have a skilled team and facilities in which to undertake cataract surgery, although access to the hospital may be restricted for patients and sometimes staff.

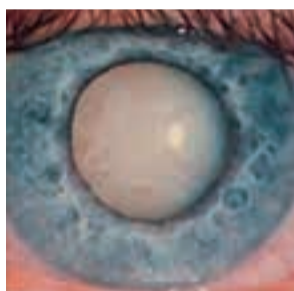
There is also a debate that is exercising everyone faced with the challenge of reducing cataract blindness in developing countries and that is, 'what is the safest and most cost-effective surgical method for operating on cataracts, with the best outcome for patients?'

Nowadays there are two established methods for operating on cataracts. Both involve small incisions in the eye with

no stitches and the insertion of an implant. One is called phacoemulsification and is regarded as the 'gold standard' in developed countries. It entails the use of very expensive equipment and an ultrasound suction probe, which is used for removing the cataract. The other is called 'manual small incision cataract surgery' (SICS) and involves no expensive equipment and simple instrumentation. In skilled hands the results of SICS are as good, the surgical turnover time is 1.7 times faster and the cost per patient (excluding capital costs) is almost 5 times less.

A prospective randomised clinical trial of phacoemulsification vs manual sutureless small-incision cataract surgery was carried out in Nepal. The conclusion drawn was:

"In the hands of experienced surgeons, both phacoemulsification and manual SICS achieved excellent visual outcomes, with low complication rates in patients with advanced cataracts. Manual



View of cataract in human eye (courtesy Nick Astbury)

SICS was a faster and less expensive technique than phacoemulsification. For this reason, we believe that manual SICS is the more appropriate technique for addressing the

large and growing backlog of blinding cataracts in the developing world."

However, despite the above, and for a number of reasons, there is not a clear case in favour of manual small incision cataract surgery. It is a technique with which few eye surgeons are totally familiar. This is partly because all over the developed world phacoemulsification has become the norm and SICS is simply not taught.

Surgeons who are expert at SICS often work in countries such as India or Nepal and gain their experience by operating on literally hundreds of patients in a week. In addition, many patients who have heard of phacoemulsification express a wish to have their surgery done by that method. Therefore, despite the obvious advantages

to SICS of low cost and speed, there is still a duty placed upon eye surgeons (including those at SJEHG) to carry out the 'gold standard' procedure, even when working in a more challenging part of the world.

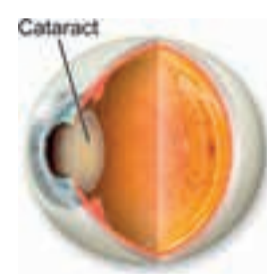
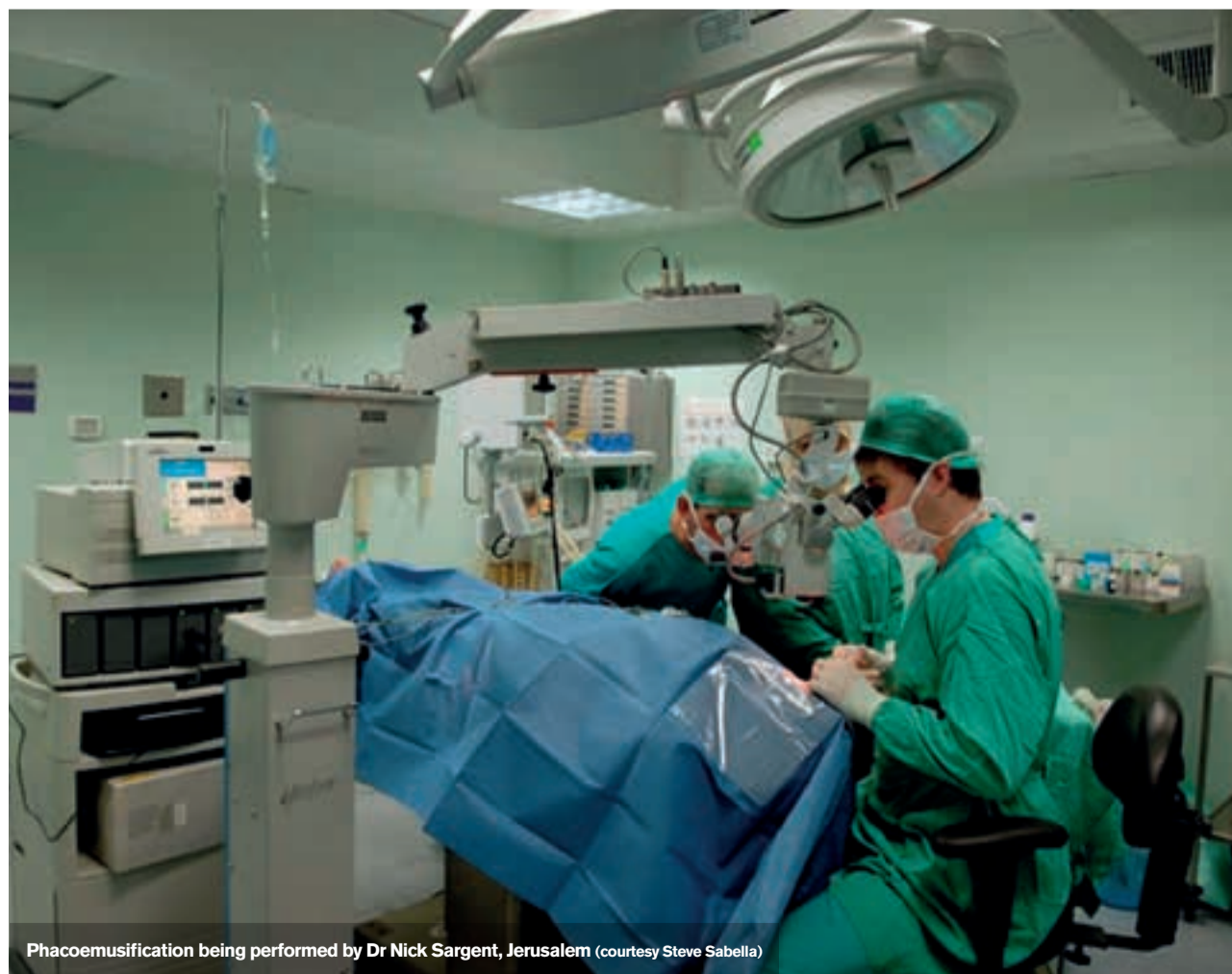


Illustration of cataract in human eye (courtesy Nick Astbury)

In 2011, SJEHG performed 3,109 phacoemulsification procedures across the oPt.

Mr Nick Astbury FRCS FRCOphth FRCP Hospital Group Trustee



Phacoemulsification being performed by Dr Nick Sargent, Jerusalem (courtesy Steve Sabella)

# Our Joint Training Programme

## Bringing Palestinian and Israeli together

Many of you who have been supporters of the Eye Hospital Group for a while will know of our Joint Training Programme with the Hadassah University Hospital in West Jerusalem that has been running since 2001.

Eleven years into the project, Jerusalem Scene thought it might be timely to remind our readership of the wonderful dialogue between East and West Jerusalem that is made possible by this groundbreaking venture.

Indeed, what many of you will not know is that the project has recently been extended to include a relationship with the Shaare Zedek Medical Centre.

Completed in 1979, this massive hospital complex is made up of ten interconnected buildings situated on an 11-acre campus opposite Mount Herzl – although Shaare Zedek has been delivering medical care to the people of Jerusalem since it opened its doors as a 20-bed hospital on Jaffa Road in 1902.

Since moving to its current location, Shaare Zedek has

become an important, multi-disciplinary hospital with a worldwide reputation. Fully affiliated with the Faculty of Medicine at the Hebrew University, it is also a much respected teaching hospital.

In January 2011, our own Dr Waleed Abu Dayeh began a one year, full-time Medical Retina Fellowship at Shaare Zedek.

Dr Abu Dayeh joined the staff at SJEHG as an Ophthalmologist in 2006 after completing his basic medical and ophthalmic training in the Ukraine. In January this year, he was able to return to us as a Medical Retinal Specialist.

The original, three-year Joint Training Programme with our colleagues at the Hadassah University Hospital was initiated and funded by The Peres Centre for Peace in 2001.

Founded in 1996 by Nobel Peace Laureate and current President of Israel Shimon Peres, the Peres Centre's peace-building activities derive from four main principles, including *People-to-People Dialogue* and *Capacity-Building through Cooperation*.

As the project permitted our Residents to benefit from the outstanding educational opportunities at Hadassah, when its funding expired,



Dr. Abdallah Abu Hantash with his son Zain and his daughter Hala. Dr. Abu Hantash is currently doing a Corneal Fellowship at Hadassah

we negotiated a continuing relationship with Hadassah that we have sought funding for ourselves ever since.

Cultivating such a relationship has been beneficial to SJEHG in other ways. Hadassah does certain pathology examinations for us free of charge and, should we require a second opinion in cases of suspected Retinal Blastoma, these too are referred to Hadassah. SJEHG does not have a cancer specialist and does not offer radiation or chemotherapy.

The person at the Jerusalem Hospital on the cutting edge of this important East/West dialogue is Medical Co-ordinator, Maureen Meo. Maureen is also assistant to Medical Director, Dr Jeanne Garth, and her duties include managing referrals to Hadassah and organising the all-important travel permits that are required by patients or staff travelling from the West Bank. She has met personally with the Israeli security team at Hadassah and enjoys a good relationship with them.



Dr. Waleed Abu Dayeh with a patient in Jerusalem

Fulfilling the original Peres Centre mandate, our Teaching Programme with Hadassah and Shaare Zedek continues to succeed in a number of very key areas. It permits local trainee doctors to experience the very latest ophthalmic theories and techniques, thereby developing and ensuring the sustainability of quality eye-care in the oPt. It thus helps to

alleviate the high levels of poverty, permitting individuals to play a productive role in the local economy.

And – lest we forget – it helps to support peace by bringing Palestinian and Israeli together.



Maureen Meo at her desk in Jerusalem

# Funding Today

## The St. John Family

**As always, significant thanks go out to all in the St John Family across the world.**

Over the course of 2011, you provided a grand total in assistance to the Hospital Group of £1,148,903 (\$1,802,368).

The league table of individual country total contributions for 2011 is thus: the Priory of England donated £378,275, the Priory of the United States £338,852, the Priory of Scotland gave £136,264, the Priory of New Zealand £126,016, the Priory of Canada £70,553, the

the Jerusalem Hospital. If you would like further information, please e-mail Patricia Tallon at patricia.tallon@btinternet.com.

### Jerusalem

In Jerusalem, as a result of our on-going efforts to engage the Palestinian Private Sector, the PALTEL Group Telecommunication Company has pledged around £33,000 (\$52,000) towards the treatment of 100 cataract patients in the Gaza Strip.

The PALTEL Group is the national telecommunications provider in Palestine. With the

hospital to relocate these in line with the international standards. The work was due to begin on 1st of February and will last for five to six months.

Bayt Mal Al Qods Acharif Agency was set up in 1998 upon the initiative of His Late Majesty King Hassan II of Morocco, then Chairman of the Al Qods Committee. It stands as a non-profit Islamic Arab institution that seeks to conserve the Islamic and Arab presence in the sacred city of Jerusalem.

SJEHG is enormously grateful to both organisations for their support of our work.

David Dahdal, Fundraising Manager, Jerusalem

### London

In London, our fundraisers worked hard over the course of 2011 to bring in an impressive total of £1,471,000 (\$2,321,280) by the year's end.

Particular acknowledgement, as always, should go to the Swire family and The John Swire 1989 Charitable Trust for their unstinting support of our work.

The Clothworkers' Foundation, too, has been staunch in its support of the Hospital, year after year, as have, the Cadbury family, The Edwina Mountbatten and Leonora Children's Foundation and, more recently, The Eranda Foundation, The Vitol Charitable Trust and The Prem Rawat Foundation.

New supporters in 2011, included The Jersey Overseas Aid Commission, The MBC Heritage of Islam Trust, The SYMPHASIS Charitable Foundation and Children of Peace.

Returning to the fold were Fondation Pro Victimis, The PF Charitable Trust and The Schroder Charity Trust. Huge thanks go out to all of these wonderful organisations for their interest in, and support of, the work that we do.



Schoolgirls from Abdala bin el Hussein school bring gifts for Eid Al Adha Nov 2011

As always, our deepest gratitude goes out to all who donate In Memoriam and choose to leave legacies to the Hospital.

Without the broad, international support mentioned here – as well as the many other kind, generous and loyal supporters who are not – we would simply not be able to continue in our

mission to care for patients regardless of whether or not they are able to pay for their treatment.

On behalf of everyone associated with The St John of Jerusalem Eye Hospital Group, we extend our warmest gratitude for your continued enthusiasm and assistance.

## Keeping Peace in Sight:

### Words and Music of Resilience

**London Event in Aid of SJEHG: Save the Date!**

**Thursday 29th March, doors 7.30pm**

**Venue: Phoenix Artists Club**

**1 Phoenix St, off Charing X Rd, London WC2H 0DT**

Entry £7 / £5 concessions

All money raised will be donated to our Patient Relief Fund.

Lifelines, a collective of poets, writers, musicians and performers based in London, use their free time to organise benefit gigs for international development organisations in the UK. They have chosen SJEHG for their Spring Fundraiser and will be presenting an outstanding evening of entertainment and education, showcasing writers, musicians and poets, who all in their own way feel passionately about eye care for the Palestinian people.

Also performing:

**Ali Alzougbi & Yamina Bakiri**  
writer/storytelling duo, who will be performing 'It's Nothing Personal'

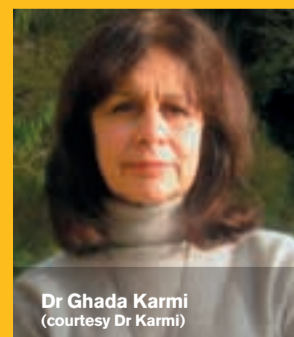
**Khaled Hakim**  
Sufi musician and daf (drum) player

**Nia Davies**  
poet

More artists to be confirmed.

There will also be an open mic session with poets invited to give short performances on themes of peace and resilience. MC for the evening will be Luke Roberts, one of the founders of Lifelines.

Feryal Awan  
Fundraising and PR Officer



Dr Ghada Karmi (courtesy Dr Karmi)

Headlining the event will be the acclaimed Palestinian author **Dr Ghada Karmi.**

Lifelines



Residents' Graduation Ceremony Nov 2011 (Dr. Mohammed Ma'ali, Dr. Omar Abdel Dayem, Dr. Jeanne Garth, John Talbot, Dr. Ala' Al-Hanash, Rod Bull, Dr. Bashar Jaber)

Priory of Australia and New South Wales £58,941 and the Priory of Wales £40,000.

Fantastic news at this time is that Priory sponsorship of our staff in 2011 rose by £198,969 to an amazing total of £981,123. 49 staff members are now sponsored in this way. This is of an incredible help to us as staff costs are our highest expenditure. We send our warmest wishes to you all.

### Visit the Hospital in Jerusalem!

The Guild is currently devising a tour of the Holy Land, which will take place at the end of September 2012. Visiting various sites in Galilee, Jerusalem and Bethlehem, it will also take in the main Hospital in Jerusalem, our clinic in Anabta and the Hospital in Hebron. Those taking part will also attend an Order of St John investiture at

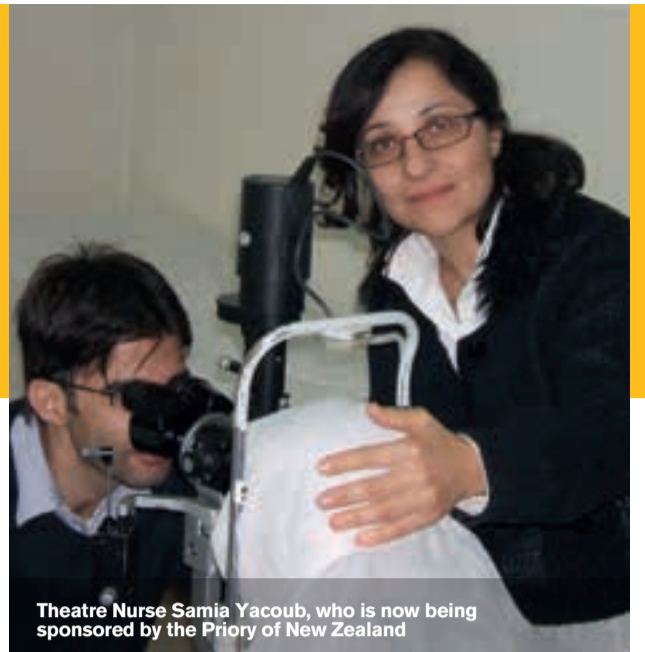
pace of technology rapidly changing, PALTEL today leads Palestine into the new era of communications through its state-of-the-art technology and advanced services.

The generous support of the PALTEL Group will enable our surgical team to perform 100 cataract surgeries for patients who cannot afford the least cost of treatment. It is worth mentioning that these patients already struggle with very harsh living conditions, and this intervention will have an enormous impact. It will reduce the financial burden placed on these households and enable them to invest their limited available resources in improving day-to-day living conditions.

In other news, the Hospital Group has recently signed a grant and works agreement with the Bayt Mal Al Qods Acharif agency for the renovation of Jerusalem's female and male wards, which will allow the



Judith Hoban  
(Courtesy Mrs Hoban)



Theatre Nurse Samia Yacoub, who is now being sponsored by the Priory of New Zealand

## Dynamic Support from the Other Side of the World

### Priory Hospitaller, Judith Hoban, on the significance of the Eye Hospital to Our Friends in New Zealand

#### Sponsorship of Theatre Nurse Samia Yacoub, providing over \$NZ60,000

to support the Nurse Accommodation Conversion Project and launching a St John rose to mark 125 years of St John service to New Zealand were three of the NZ Priory's undertakings in support of SJEHG in the last year.

In our small nation of around 4 million people, St John provides an ever growing number of services to the community. Last year we attended over 336,000 emergency incidents and treated

and transported more than 396,000 patients. Events teams provided first aid and medical support at nearly 9,000 events and treated over 31,000 patients. These and the many other services we provide are detailed on our website - [www.stjohn.org.nz](http://www.stjohn.org.nz) - for those who wish to learn more about us. Yet, in addition to this enormous national commitment, NZ St John still finds time and energy to support its family at SJEHG. It is because we are conscious of our history and the unique part our hospital plays in the International St John family, that our people give so willingly

and generously to support our Jerusalem based teams.

St John Youth have displayed great imagination in fundraising initiatives including concerts showcasing members' talents. Fellowship Groups and Hospitaller Clubs are skillfully adept at fundraising - particularly through food related activities, garden events, raffles and small coin collections. The St John rose, "Luminis" (Latin for light) has become a firm favourite in gardening circles. Order Member Oblations along with any attached donations are remitted in total to the Eye Hospital.

Our Eye Hospital Support network is responsible for promoting understanding of the hospital and for raising funds to provide financial support.

The range of advocacy material produced internally is well supported by Jerusalem Scene. Immensely popular, the periodical is widely read, quoted and appreciated. Copies are displayed at and available from, offices, meeting venues and ambulance stations all around the country. Jerusalem Scene is distributed in its range of formats to over 16,000 New Zealanders!

NZ is proud of its record of service and the continuing support it generates for our teams in The Holy Land; we are equally proud to have encouraged and supported many NZ personnel who have contributed in a practical way to service delivery.

Despite our geographical location, the knowledge that we can play an important part in helping to maintain the extraordinary services of our Eye Hospital Group is gratifying.

Mrs Judith Hoban  
New Zealand Priory Hospitaller

## A Fond Tribute to Dr Michael Ward OBE KStJ

### Jackie Jaidy bids adieu

#### Friends and colleagues of Dr David Michael Ward were saddened by the news of his passing on New Year's Day.

As the Warden of the hospital for five years from 1990 to 1995, his leadership inspired confidence and trust at one of the most difficult periods in its history. During the first Gulf War, when Scud missiles whizzing overhead were a regular occurrence several times a day, Michael's sense of humour encouraged everyone.

The most difficult part was the fear of gas from the missiles and everyone had to have a sealed room that should have no outside wall or window. In the Warden's house this was the bathroom, so each time the siren went off, Michael and his wife Sonia went off to their bathroom until the radio had announced that everyone could come out. Of course, the announcement was in



Dr Michael Ward

Arabic or Hebrew so Michael and Sonia relied on hospital staff to phone and tell them when it was safe. On one occasion the staff forgot and they were left sitting in their bathroom for half an hour until they gingerly ran to the phone and asked if it was safe to come out...

**Michael was born and raised in Mansfield, Nottinghamshire, and did his medical training at Birmingham Medical School. He also worked in Sheffield and at Bristol Eye Hospital, where he met Sonia. They married in 1963 and spent a year in Jamaica, where their daughter, Joanna was born.**

Upon their return to Sheffield, they then moved to Torquay in Devon, where Michael was Consultant Ophthalmologist at

Torbay Hospital for 25 years. Michael always said that the highlight of his career was his time in Jerusalem, where he was well known for his love of the hospital garden. When he retired, Michael achieved a Diploma with Distinction from the Royal Horticultural Society (RHS), and later an Advanced Diploma, which he said were more taxing on his brain than any of his medical training!

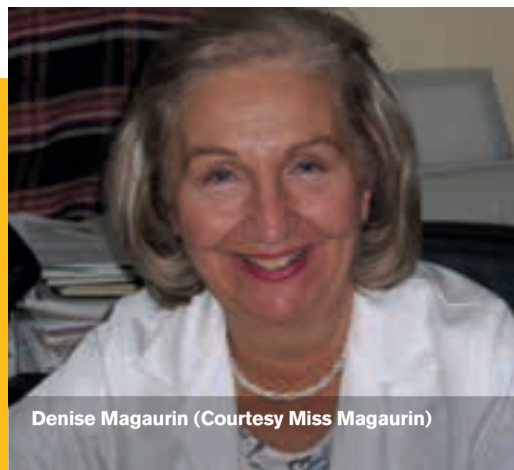
Michael and Sonia are remembered for their kindly and friendly approach to all the hospital staff. Well known in the local community, they ensured the reputation of the hospital remained in high esteem both in Jerusalem and abroad.

Michael was awarded the OBE and was made Knight of the Order of St John in 1995.

Mrs Jacqueline Jaidy  
Hospital Matron 1996 - 2009



Patricia Tallon (Courtesy Ms Tallon)



Denise Magaurin (Courtesy Miss Magaurin)

# Guild Welcomes New Chairs

## Two distinguished St John devotees take over

**With the year's end came the conclusion of The Dowager Lady Westbury's year-long tenure as Chair of The Guild.**

Jointly taking over the position in 2012 are two of the most well-known faces at many a fundraiser in aid of the Hospital Group, Ms Patricia Tallon and Miss Denise Magaurin.

*Denise Magauran, writes,*

**“My first introduction to the St John Eye Hospital was when, as a young doctor, I went to work there in 1973. The importance of the provision of eye care for people living in east Jerusalem, the West Bank and Gaza soon became clear to me...**

In 1992 I went back to the Hospital in Jerusalem to work full time as a Consultant and Clinical Tutor and later I became Chief Surgeon.

Together with Patricia Tallon, I have just been appointed as Joint Chairman of the Guild and thus have another chance to serve the Hospital. We have taken over from Lady Westbury who has done a marvellous job and to whom we are most grateful.

The Guild organises Charity events which raise much

needed funds to help support the Hospital and also keep it in the public eye. This money helps to sponsor the Nursing Director, Mr Ahmad Ma'ali.

**The work of the Guild is as important today as it was when it was first formed, and we intend to help the Hospital as much as we can during our chairmanship.”**

The Order of St John Ladies' Guild was formed in 1928 by Queen Mary, its aim being to supply linen to the hospital in Jerusalem. Known now as the Guild, this superb group of both male and female volunteers, works tirelessly to devise and run fundraising events to support the work we do across the oPt.

If you would like to become a member of this venerable institution, or would like some more information, please e-mail [info@stjohnseyehospital.org](mailto:info@stjohnseyehospital.org).

**There are many ways in which you can support the work of the St John of Jerusalem Eye Hospital Group. Some of these are listed below:**

### Regular Giving

You might choose to make a regular donation to help us plan our future charitable works with confidence.

If you would like to give via Direct Debit, please go to the Regular Giving page at [www.stjohnseyehospital.org](http://www.stjohnseyehospital.org). There, you will also find a Standing Order donation form, which you can complete and send to us by post.

You can also arrange regular and one off donations at the St John of Jerusalem Eye Hospital page at [www.virginmoneygiving.com](http://www.virginmoneygiving.com).

### Organising an Event

If you're taking part in an organised event to raise money for charity, or wish to organise your own personal challenge, why not consider being sponsored on behalf of the Eye Hospital Group? You can set all of this up via our page at [www.virginmoneygiving.com](http://www.virginmoneygiving.com), or contact [feryal.awan@stjohnseyehospital.org](mailto:feryal.awan@stjohnseyehospital.org)

### In Memory

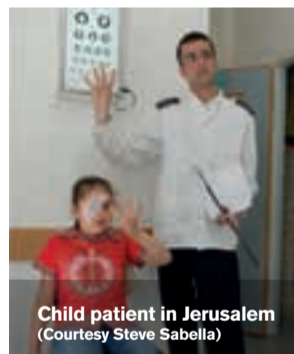
Whenever a gift is made to the Eye Hospital Group in memory of a friend, relative or loved on we can enter their name into our

Book of Remembrance with the date of their passing.

In memory gifts can be arranged through funeral directors or directly by contacting Feryal Awan at [feryal.awan@stjohnseyehospital.org](mailto:feryal.awan@stjohnseyehospital.org) or phoning 020 7553 6964.

### A Legacy Gift

We do understand that this is a very personal decision and that your commitment to your dependants comes first. However, if you do decide to help us, there are several ways to leave a gift. If you have any queries or wish to discuss donating, please email [feryal.awan@stjohnseyehospital.org](mailto:feryal.awan@stjohnseyehospital.org) or phone 020 7553 6964.



Child patient in Jerusalem (Courtesy Steve Sabella)

And don't forget to look for **St John of Jerusalem Eye Hospital Group** on Facebook, or **@StJohnEyeHosp** on Twitter.

## Contact Us and Details

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**Photography as accredited.**

## Donation Form - Spring 2012

- I would like to support the appeal for the new Gaza Day Case Hospital  
 I would like to support the work of St John Eye Hospital Group.

£25  £50  £100  £1000  Other

I enclose a Cheque/CAF for £..... made payable to 'St John Eye Hospital' or debit my:

Mastercard  Visa  Maestro/Switch

Card No.

Security Code  Valid From  Expiry Date

Issue Number (Switch/Maestro only)

Signed ..... Date .....

Please note: donations under £10 will not be acknowledged

Please tick if you are a UK taxpayer and would like St John Eye Hospital to treat all donations you make from this date forward as Gift Aid donations, until you notify us otherwise.\*

Title ..... Name .....

Address .....

..... Postcode .....

Email ..... Phone .....

### Thank You very much for your support

**Gift Aid Notes\*** 1. You must pay an amount of income tax and/or capital gains tax at least equal to the tax the St John Eye Hospital reclaims on your donations in the tax year (currently 28p for each £1 you give). 2. If in the future your circumstances change and you no longer pay income tax / capital gains tax equal to the tax we reclaim, you can cancel this declaration. 3. You may cancel this declaration at any time by notifying us - it will then not apply to donations you make on or after the date of cancellation or such later date as you specify.

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