Trustees’ Annual Report 2015

Saving Sight | Changing Lives
As an entity of the Most Venerable Order of 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.
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Thank You

Aims of the Charity

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. We have been treating patients in the region regardless of their ethnicity, religion or ability to pay for over 130 years.

Our sight saving work is carried out against challenging and difficult odds to the highest international standards.

Our Impact
changes lives

We enhance education and employment prospects, and contribute to economic growth in the region, through the service provided by our hospitals and mobile outreach programme.

Glossary: CBM - Christian Blind Mission. JCI - Joint Commission International. NGO - Non-governmental organization. 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 according to the context. UNDP - United Nations Development Department. UNRWA - United Nations Relief and Works Agency, the UN branch responsible for Palestinian refugees. USAID - United States Agency for International Development.
Our overarching aim is to deliver the highest standards of patient care, with the most efficient approach possible. We measure our successes by comparing our standards to our counterparts worldwide, notwithstanding the challenging region within which we work. The scale of the political problems in the area did not diminish in 2015, but we have continued to improve our capacity and standards throughout our services.

Our Gaza Hospital remains the only significant NGO building constructed since the 2014 conflict. This is quite an achievement in an area where 170,000 buildings sustained various degrees of damage during the recent tensions. The hospital will see its official opening in 2016, after suffering setbacks owing to the blockades and other pressures in the area.

Capital projects have been a primary focus of 2015. As well as our achievements in Gaza, our new hospital in Hebron was opened to patients in November. Because work on other parts of the building is still to be completed, we have not yet begun actively to publicise the new facility, but already we are seeing encouraging patient numbers. We also began restoration of the Muristan, the Order of St John’s site in the Old City of Jerusalem. Once restored, this building will provide a primary and emergency eye care clinic for the Old City for over 5,000 patients annually. The property will include a beautiful garden, as well as a rooftop viewing platform with unrivalled views of the Old City and further afield.

Funding for the first significant research undertaken by the Hospital for over 20 years was secured during the year, from the European Union’s Partnership for Peace Programme. The first genetic research unit in the oPt will be implemented in our Jerusalem Hospital, with support from the Israeli Hadassah Medical Center. The aim of this unit is to tackle hereditary eye diseases within the most underprivileged Palestinian communities, as well as being a partnership that encourages constructive relationships between Palestinians and Israelis through healthcare.
Our Mobile Outreach Programme saw 16,700 patients during the year compared with 10,500 in 2014, a noteworthy increase. The programme is now flourishing with the addition of a second unit thanks to funding from USAID, UNDP, Dr Michael Dan, CBM and Jersey Overseas Aid Commission.

A new documentary on the work of SJEHG has won three prestigious film awards.
The outstanding 25 minute documentary “Eyes of St John”, was directed by filmmaker Carlo Nero and produced by his mother, the actress Vanessa Redgrave. We were delighted that the documentary had its London private preview screening in the presence of Her Majesty Queen Noor of Jordan. It will continue to be used to promote the work of SJEHG amongst our supporters worldwide.

The charity’s income in 2015 reached £8.5m; thanks to the ongoing support of our donors £4.6 million of this came from charitable sources. Unfortunately, we have felt some of the effects of the crisis in Syria with a reduction in gifts from major donors and patient related income. UNRWA, which provides us with 7% of our patient income, has had to divert much of its resources to dealing with refugees fleeing the crisis, some of whom are Palestinian. This has understandably resulted in a reduction in the amount it can contribute to us.

As always we would like to thank our friends in the St John Priories and Associations, who donated over £2.2m during the year. We would especially like to thank the US Priory for increasing their donations to $2 million this year; their steadfast passion for our cause is unwavering and truly appreciated. We are so grateful to everyone who has given so generously, in spite of other pressing world issues.

We aspire to demonstrate the impact of your donations by working to build upon our successes in 2015 and by continually striving to deliver only the highest standards of patient care to those we are committed to serve.

Nicholas Woolf KStJ
Chairman
10 May 2016

Brigadier Tom Ogilvie-Graham MBE CStJ
Chief Executive

The new Gaza Hospital, due to open in June 2016
About SJEHG

Our Jerusalem Eye Hospital has been operating for over 130 years. It has a large, modern outpatients department, specialist retinal, corneal, orthoptic and paediatric units, operating theatres and 24 hour emergency services. We are the first Palestinian hospital to receive JCI accreditation.

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

Our Anabta Clinic is accessible to the 1 million residents in Anabta and surrounding towns. Those living in the area are amongst the poorest in the oPt and many are refugees from Gaza. There is a particularly high prevalence of diabetic retinopathy in this area of the West Bank.

Our Hebron Hospital is a vital source of eye care for an area which is particularly affected by the movement restrictions in the West Bank. The hospital provides sight-saving treatments such as cataract and laser eye surgery to treat diabetic retinopathy, and serves the 640,000 people who live in and around Hebron, including the semi-nomadic Bedouins of the Negev Desert.

Our Gaza Hospital was established in 1992 to meet the growing need for eye care in a population that has been facing increasing difficulties in accessing the main hospital in Jerusalem.

Over 1.8 million Palestinians live in isolation in Gaza, one of the most heavily populated areas in the world, of which 1.3 million are refugees. In December 2015, one third of patients from Gaza were denied access to the West Bank to receive medical care. This serves as a reminder of the need for SJEHG’s services in the area.

Our hospital remains the leading provider of ophthalmic services, working in near-emergency conditions, yet to the same high standards as our main hospital. Despite these difficulties, our doctors manage to treat more Gazan patients every year, rarely closing apart from during periods of conflict.

Our Mobile Outreach Programme delivers essential eye care to some of the most remote and impoverished communities in the West Bank, and serves a population of 2.5 million people. The teams coordinate permits needed for patients with complex eye issues to be referred to one of our centres. In 2015 we reinstated our second Mobile Outreach unit, leading to a significant increase in patient numbers.

Our three-year Diabetic Retinopathy Screening Programme finished in 2015. We surpassed our targets and will continue the programme. We will also be taking a similar programme to refugee camps in Jordan during 2016.

Our Sir Stephen Miller School of Nursing is the only provider of specialist ophthalmic nursing training in the oPt. Upon completion, graduates are awarded a Postgraduate Diploma in Ophthalmic Nursing, accredited by the University of West London. Many nurses who undertake the course are given future employment with us. The remaining nurses work in other medical centres across the oPt, where they become the facilities’ expert in the area, and often provide referrals to our clinics and hospitals.

Our 4-year Medical Residency Programme at the Jerusalem Hospital trains local doctors, investing in the oPt’s healthcare infrastructure. Once qualified, our doctors can specialise in a particular area of ophthalmology under our Fellowship Programme. Our joint teaching programme in partnership with the Israeli Hadassah Medical Center, is where many of our doctors undertake their training. This partnership allows our doctors to access training that is not available to them in the oPt; as well as encouraging constructive relationships between Israelis and Palestinians.
Snapshot of 2015
In 2015 we treated **128,000** patients including performing over **5,000** major surgeries.

**Anabta Clinic**
We treated **22,000** outpatients at our Anabta Clinic.
**17** staff members, including **11** medical staff.

**Gaza Hospital**
Over **31,000** Gazans received eye care, including over **900** major operations.

Our new hospital is almost complete, and will open in the middle of 2016.
**17** staff members, including **14** medical staff.

**Hebron Hospital**
Our hospital treated **11,400** people including performing **340** major operations.

Our new hospital, with better capacity and in a more central location, was opened to the public in November 2015.
**14** staff members, including **9** medical staff.

**Mobile Outreach Programme**
Our second unit was reinstated, leading to a significant increase in patient numbers - from **10,500** patients in 2014 to over **16,700** patients in 2015.

**11** staff members, including **8** medical staff.

**Jerusalem Hospital**
We treated over **46,500** people in our hospital in Jerusalem including performing **3,800** major operations.

**170** staff members, including **98** medical staff.

**Diabetic Retinopathy Screening Programme**
Our three-year programme came to an end 2015. Our target was to screen **40,000** patients which we surpassed, reaching over **44,000** patients in total.

The programme will continue in 2016 as well as expanding to treat refugees at camps in neighbouring Jordan.
### Highlights of 2015

#### Patients
- 128,000 patients treated, including over 5,000 sight-saving operations performed

#### Community Outreach
- Over 16,700 patients treated by our Mobile Outreach Programme
- Over 44,000 patients screened by the completion of our three-year Diabetic Retinopathy Programme

#### Professional Development
- 236 staff, including 33 doctors and 84 nurses
- 5 doctors undertook our Medical Residency Programme
- 6 nurses started and 5 nurses graduated from our postgraduate training programme at our Sir Stephen Miller School of Nursing
- One doctor began a Fellowship in Ophthalmic Genetics and Retinal Diseases in partnership with Hadassah Medical Center

#### Modernisation
**Jerusalem Hospital**, which is now over 50 years old, began a process of modernisation and restoration:
- Created a new outpatient reception area and new hospital cafeteria
- Refurbished the staff dining area and seamstress department
- Introduced new signage, patient information boards, TVs for educational messaging and wifi within the hospital
- Patient Pathways implemented throughout the hospital, including colour coded directional lines to help those who are visually impaired

**Hospital Management Information System**:
- Laid the foundations of our new electronic patient record system

#### Partnerships
- ‘Peace in Sight Project’: Secured an EU grant to establish our research project in partnership with the Hadassah Medical Center
- Caritas Baby Hospital and the Holy Family Hospital (run by the Sovereign Military Order of Malta): continued our programme to screen premature babies
- Friends of St John Society: reinstated in Jerusalem to engage with local businessmen, heads of diplomatic missions, politicians and other friends
- International Doctors’ visits: including ophthalmic surgeons in cooperation with the Dallas Surgeons Fund

#### Infrastructure
- The new **Hebron Hospital** opened in a more central location for our patients in November and we are already beginning to see encouraging patient numbers
- **Gaza Hospital** building is almost complete, in spite of major setbacks due to tensions in the area
- **Muristan** restoration began at the Order’s property in the Old City of Jerusalem. Once restored this clinic will see 5,000 patients every year

#### Media
- Created our documentary, **Eyes of St John** in collaboration with Carlo Nero and Vanessa Redgrave, which has won three prestigious awards at film festivals

#### Plans for 2016
- **JCI**: JCI accreditation is considered the gold standard in health care and its consultants are the most experienced in the industry.
- The three year review will take place in April. Reaccreditation is anticipated notwithstanding higher benchmarks
Community Healthcare

• Establishing a new Diabetic Retinopathy Screening Programme in northern Jordan with UNRWA, mainly helping refugees from Syria in the area. It is the first time our services will be projected into a neighbouring country.

Infrastructure

• Official opening of the Hebron Hospital
• Completing the new Gaza Hospital
• Completing the new Muristan Clinic
• Modernisation will continue in our Jerusalem Hospital with the replacement of outdated pipe work; the paediatric and retinal clinical areas will be separated to create better patient flow.

Information

• A roll-out of the new Hospital Management Information System to digitise our patient records.

Research

• A fully equipped genetics research laboratory will be installed in the Jerusalem Hospital
• Our doctor’s fellowship in hereditary eye conditions will continue, allowing SJEHG to begin researching the condition in the oPt
• Research articles are planned to be published in recognised journals for the first time in 20 years.

Training

• One doctor will begin training for a Fellowship in Glaucoma at the Avarind Eye Hospital in India, enabling our Gaza Hospital to begin providing treatment for the most complicated glaucoma cases
• Five doctors will continue their training on our Medical Residency Programme
• Six nurses will continue their postgraduate training at the Sir Stephen Miller School of Nursing

Media

• Releasing Eyes of St John on an international stage
• Launching of our new interactive website & online shop

Statement of Financial Activities

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Legend:
- Green
- Yellow
- Grey
Denise Magauran is a former employee of SJEHG, dedicated supporter, Guild Member and legacy pledger.

I first became aware of the marvellous work of SJEHG in the 1970s when working as a senior registrar at St Paul’s Eye Hospital in Liverpool. I went out to Jerusalem in 1973 and worked there for a year as Assistant Surgeon. On my return, I missed the city. When the opportunity to return arose in 1991, I came back to become Chief Surgeon, and stayed for eight years.

It was during my time there as Chief Surgeon that the Medical Residency Programme was established, which was very enjoyable work. The staff were fantastic and the ophthalmology was very interesting. Jerusalem is a very fascinating place to live and I made many friends there. One of these was Father Jerome Murphy O’Connor, renowned Dominican at the Ecole Blique, who led a walking group around the Holy Land on Sundays. Our group were all good friends and we learnt an amazing amount about archaeology, theology and the terrain of the country.

Upon return to the UK, I wanted to continue to help SJEHG. I was asked to join the Guild soon afterwards and was also appointed to the Hospital Board, a role I held for three years. I was also appointed as a Consultant at the St Helier/ Epsom Hospitals where I worked for nine years. I have now retired to Painswick in Gloucestershire.

I have been out to the Jerusalem Hospital once or twice every year since. Originally this was to help the other doctors in the theatre, clinics, and on outreach. However, as the doctors are now very well trained, my trips now are more focussed on seeing my old colleagues. I particularly enjoy the Investitures where I give my award [The Denise Magauran Cup] to the doctor who has contributed the most to the medical department that year.

The work that SJEHG does is something I believe so strongly in, and I was looking for more ways to help. Leaving a legacy seemed right. It was time to update my Will, so I decided to leave a gift to my favourite charity.

Some people underestimate the value of the assets they will leave behind, but leaving a gift of even a few percent of their estate could give considerable help to their chosen charity.

It is good to know that any money left behind will be used effectively, and in a way that means my support for the work will continue long after I have died.

My legacy will be left as an endowment fund for further specialised training for our doctors and nurses, as this is what I was involved with in my lifetime.

I will never forget my time working for SJEHG, conducting outreach in the West Bank and Gaza, doing research in the West Bank and living in Jerusalem. It is one of the most important and rewarding times of my life.
Omar*, 13, from the Gaza Strip, has already led an exceptional life in spite of his young age. Omar is the eldest child of a university professor and social care worker in the Gaza Strip. His parents tried to have children for a very long time until eventually receiving their happy miracle, and as such he is extremely precious to them. He grew up to be a very smart child, achieving mainly 90% or higher in all his school exams.

In late 2013, at the age of 10, Omar’s vision began to deteriorate. His mother recalled holding fingers out in front his face for him to count and him being unable to see anything. Consequently his grades began to plummet. His parents took him to the local government hospital in Gaza, who referred him on to a specialist clinic in Ramallah (in the West Bank). This is quite a difficult trip for any Gazan to make. It is not only expensive but there is also an arduous permit procedure to get through. In December 2015 the permit approval for medical cases dropped to its lowest in seven years, at only 67.5% (World Health Organisation) - this is why our Gaza Hospital remains such a vital part of our services.

Thankfully, in this family’s case, they managed to arrange permits. Tests were undertaken, and the most devastating diagnosis was given to the family. Omar had a mass behind his right eye. It was diagnosed as an intraocular tumour - in layman’s terms, a lump behind the eye, that might or might not be cancerous. Further checks would be necessary to see whether the tumour was malignant and his eye would potentially need to be removed. His mother described her utter devastation at receiving the news; after being given the miracle of her son, it felt as if he were being taken away.

However, thanks to the keen eye of one local Gazan doctor, and our St John team, Omar’s story did not end in tragedy.
As Ramallah is hard to reach for local Gazans, his case was moved to the UNRWA hospital in Gaza. It was there his case was handed to a local doctor who noted there was something not quite right about Omar’s diagnosis. He opted to get a second opinion from our own retinal expert, who has a reputation for being one of the best retinal eye doctors in the area.

Omar first saw our doctor three agonising months after his original diagnosis, and this is where his story changes for the better.

After further testing Omar was rediagnosed not with an intraocular tumour, but with a congenital ruptured retinal macroaneurysm - a different condition entirely. This is essentially a vein behind the eye that is weak from birth. If it is over expended the vein will burst, causing vision loss and permanent blindness, if it is not caught in time. The mass which was originally diagnosed as a tumour was in fact a accumulation of blood from a burst vein. The family was given the good news and his mother described the moment they told his father who began ‘dancing around the kitchen’ with joy. The relief was incredible.

However the treatment Omar would have to undergo was still difficult, let alone for a child of his age. Our doctor took great care to stress the fact that, in his words, Omar was a ‘hero’ for undergoing the treatment at such a young age. All in all over six months he received five laser eye treatments and six injections into his eye. All but one of these was performed under topical anaesthesia. That means that Omar was fully conscious, with only eye drops to numb the eye.

Omar is now a happy and healthy 13 year old. His eye sight is so good he does not even need to wear glasses. He absolutely love maths, his favourite subject at school, and plans to train as a doctor. His grades are back up in the top percentile. The family are extremely thankful for the expert care that SJEHG had to offer. In his mother’s words:

“Thank you for everything. Omar’s doctor adopted the boy and treated him as his own son, he was the first person to give us a thread of hope, and wanted only the best for us all. He brought us alive again. Thank you to St John, thanks to you all!”

Last year in Gaza we saw 9,500 children and performed 195 major surgeries. This sight-saving work is necessary as it is increasingly difficult for the typical Gazan to seek health care outside of the Gaza Strip.

With the opening of our new Gaza Hospital we expect the number of patients we treat to grow as the new hospital is much larger. Donating to SJEHG will help children just like Omar gain access to vital eye care, allowing them the futures they deserve. If you would like to make a donation, please get in touch. Our contact details are on the back page.

*Name has been changed to protect child’s identity.
We go to great lengths to train our local staff. In doing so, we are contributing positively to the fractured Palestinian infrastructure.

The Medical Residency Programme invests in Palestinian doctors and enhances their ability to provide essential sight-saving skills for the Palestinian population. There is nowhere other than our Jerusalem Hospital that offers comprehensive training for Palestinian ophthalmologists in the oPt.

Over the past 10 years, in line with our vision of providing a sustainable service of excellence to the people we serve, Palestinian ophthalmologists have continually received specialist training. SJEHG now has Palestinian specialists in every field of ophthalmology, except complex oncology (a service which is readily available in Jerusalem, should it be required). In the past these services would have been provided by visiting expatriate specialists. These visits were often staggered or ad hoc which could lead to long delays in patients receiving urgent care - especially in times of conflict. Our specialists can now treat eye problems across the board, meaning our patients can be treated to an expert level as soon as possible.

Our highly-regarded Sir Stephen Miller School of Nursing offers up to ten places on the Specialist Ophthalmic Nursing Course every year and is accredited by the University of West London. Many local nurses who undertake the course become SJEHG employees.

SJEHG also enjoys an outstanding relationship with Israeli Haddasah Medical Center which has provided world leading fellowship training to our doctors. As an offshoot of this partnership we have also begun a research project the results of which will hopefully be included in internationally accredited journals, putting SJEHG research on the international map.

*Employee numbers above are the average for the year.

Case Study: Alice

Ophthalmic Nurse: Mobile Outreach Programme

Alice Aslamian is one of our 2015 ophthalmic nurse graduates from our Sir Stephen Miller School of Nursing. In January 2016 she began a full time position with SJEHG in our Mobile Outreach Team.

In her new position Alice will be working throughout the West Bank treating patients in the most remote villages, many of whom would otherwise not be able to access healthcare.
This is an extremely exciting prospect for Alice, as in her opinion it is one of the most interesting roles on offer at the hospital. It allows her to get to know parts of the country to which she would not otherwise travel, as well as to see a diverse range of cases which typically only ever arise in our Mobile Outreach Programme.

Alice chose to train in ophthalmic nursing after graduating with a bachelor’s degree in general nursing from Bethlehem University in 2014. She chose the nursing school at SJEHG for its great reputation, and as it is one of the few providers of specialist ophthalmic nursing training, in the region in which we operate. Comparing it to her previous experience in other hospitals she had this to say:

“The best thing about St John is the teamwork in the hospital. Other hospitals do not treat their colleagues in the same way - here it’s like one big family!”

Speaking about Alice, our Director of Nursing, Ahmad Ma’ali, (who has worked his way up from a graduate of our nursing school in 1990) had this to say:

“Since she enrolled on the Specialist Ophthalmic Nursing Course, Alice was an excellent student and a role model for all her colleagues. Alice is a very capable, enthusiastic and dedicated nurse who, in a short time, has become an effective member of the SJEHG.”

Alice displays exemplary dedication in her work and we are sure that she will continue to grow and develop her skills throughout her time here at SJEHG. Alice has strong ambitions for her future: further into her career she is hoping to achieve a Masters in infection control and public health, which she feels is a priority.

Welcome to the family Alice.

SJEHG has many new nurses like Alice throughout our organisation who do not yet have sponsorship. If you would like to sponsor one of our nurses or student nurses, please get in touch.
Public Benefit

The Trustees have given due regard to the Charity Commission’s General Guidance on public benefit when planning the charity activities.

Our Trustees’ Annual Report sets out our activities, achievements and performance during the year, which are directly related to the objects and purposes for which SJEHG exists. SJEHG achieves its principal objectives through the delivery of services to members of the public in Jerusalem, the West Bank and Gaza without regard for any distinction by race, class or religion.

The Public Benefits from SJEHG’s activities are:

a. the provision and development of clinical and surgical ophthalmic services to patients at the hospitals in Jerusalem, Gaza and Hebron and the Anabta Clinic as well as the Mobile Outreach Programme;

b. the exemption from patient charges when the relevant authority does not finance the treatment and the patient is unable to pay themselves;

c. the teaching and training activities at the SJEHG which enhance the quality of service delivered and increase the pool of qualified ophthalmologists and specialist nurses within the region;

d. the research activities into endemic diseases affecting the Palestinian population;

e. our services enhance education and employment prospects and contribute to economic growth.
All plans for future projects and development are made in accordance with our Strategic Plan:

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

SJEHG will build on its JCI accreditation continually to strengthen standards and protocols on quality care and patient safety. As a leading training facility for ophthalmologists and ophthalmic nurses and provider of care, clinical quality and safety with a continued emphasis on a positive patient experience will continue to be at the core of SJEHG’s basic principles and mission.

2. 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.

3. Research: Develop a Research Unit

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 results of findings. This will result in improved outcomes for patients.

4. Partnership: To increase partnership opportunities

As a tertiary eye hospital providing comprehensive sub-specialty 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.

5. Reputation: Enhance the 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.

6. Gaza: Commitment to Gaza

SJEHG has served the people of Gaza for decades with a small hospital in Gaza City. The new, modern eye hospital, when completed, will offer comprehensive, sub-specialist 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.

7. Finance: Ensure sustainability

SJEHG is a charity reliant for 60% of its income on voluntary sources. Strong governance, leadership, and a solid fundraising strategy help to strengthen SJEHG’s financial position and ensure financial resilience to sustain the future.
Achievements and Performance in 2015

For the year ended 31 December 2015, incoming resources amounted to £8.5m, (2014, £9.3m) while resources expended amounted to £8.2m (2014, £7.7m). This resulted in a surplus of £0.3m (2014, £1.6m) before taking into account realised and unrealised gains on investments of £6,000 and exchange gains of £179,000. Overall fund balances accordingly increased by £507,000 in the year.

The decrease in incoming resources is in part due to the fact that major capital projects in the Jerusalem hospital and the other centres, especially the Gaza Hospital and the new location for our Hebron Hospital, began in 2014. This resulted in capital income in 2014 being significantly more than in 2015. A deficit of £243,000 arose on annual operating activities.

Expenditure on charitable activities amounted to £7.4m, representing 90% of total resources expended. These costs include running the hospitals in Jerusalem, Hebron and Gaza, the Anabta Clinic, two Mobile Outreach Units and the cost of teaching and training during the year for doctors and nurses. The principal component of this total is personnel costs: 63% (2014, 63%). Operating costs were contained through the continuation of enhanced cost controls introduced in earlier years.

Costs of generating funds constituted 8% (2014, 6%) of total resources expended. These represent the costs of the London-based fundraising team and the Jerusalem-based fundraising and projects team. Governance costs amounted to 2% (2014: 2%) of the total resources expended and reflect the international nature of the charity’s activities.

Total voluntary income decreased to £4.6m (2014, £5.3m) representing 54% (2014, 58%) of the incoming resources. Donations included £0.6m (2014, £1.2m) restricted for capital projects and medical equipment, in addition to £2.2m (2014, £1.8m) donated by the Priories of the Order of St John.

Overall, the value of capital projects completed during the year amounted to £1.4m. Funds generated from charitable activities (patient income) amounted to £3.8m and constituted 44% (2014, 41%) of total incoming resources. The remaining 2% of incoming resources related to income from investments.

The PA continues to pay for services rendered several months in arrears, reflecting its own cash flow issues. Funding this level of debt impacts on SJEHG cash flows, which was the case in 2015, helped when the European Commission and USAID paid a substantial part of the PA outstanding debt. Conversely, SJEHG benefits from the receipt of voluntary income, in particular for restricted purposes, in advance of the related expenditure, usually for capital projects.

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

Reserves

At 31 December 2015, SJEHG had total funds of £14.6m (2014, £14.1m). This comprised permanent endowments of £5.9m (2014, £5.9m), £1.9m (2014, £2.2m) in restricted income funds, and £6.8m (2014, £6m) in unrestricted reserves, of which £2.6m (2014, £2.6m) are available to meet the normal operating needs of SJEHG.
Reserves Policy

The Board of Trustees reviews annually the need for reserves in line with the guidance issued by the Charity Commission and consider that, in the context of the political and economic situation in the region in which SJEHG operates, unrestricted reserves need to be increased, when circumstances allow, to equate to at least six months running costs (equivalent to £4.47m) to ensure that SJEHG can continue to run efficiently with adequate working capital.

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. SJEHG still relies heavily on voluntary income received mainly from donors in the United Kingdom, Europe, Arab States, and the United States. In the current global financial situation, it remains a great challenge to continue to attract core funding from existing and new sources. The fundraising strategy includes a focus on endowment and legacy giving in order to mitigate this risk as well as a focus on major gifts for core costs.

Liquidity is a recurring issue, especially with the prolonged payment pattern of the PA for the services provided. SJEHG 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.

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

Going Concern

With general reserves at 31 December 2015 of £2.4m, and net current assets at year end of £3.6m, it is considered by the Board of Trustees that SJEHG has sufficient resources and liquidity to continue, for the foreseeable future, to manage their operations efficiently whilst maintaining a suitable flow of funds to be spent on fulfilling our charitable objectives.

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

Remuneration Policy

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

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

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

Mr Nicholas Woolf  
BSc (Econ), FCA, CTA (Fellow) KStJ  
Nicholas Woolf became a board member and Chairman in June 2012. He is a Chartered Accountant and Chartered Tax Adviser and is a former partner with Arthur Andersen. He is a former trustee of Princess Alice Hospice, Beating Bowel Cancer, and Barts Charity and was a non-executive director of Westminster Primary Care Trust.

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

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

Mr Nicholas Goulding  
BSc FCA CTA (Fellow) ATT OStJ  
Nicholas Goulding is SJEHG’s Treasurer and Secretary. He is a Chartered Accountant and Chartered Tax Adviser and is a former partner with KPMG LLP. He is Honorary Treasurer of The HM Tower of London Chapels Royal Foundation, The Honourable Company of Air Pilots, St Lawrence with St Swithun Winchester, Blue Apple Theatre and a Governor of Lord Wandsworth College.

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

Mr John Pelly  
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.

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.
Mr Herbert Von Bose
Herbert von Bose completed his studies in Law from the Universities of Bonn, Geneva and Heidelberg in 1975. He practiced as a lawyer in Mannheim and Heidelberg before working for the European Commission in Brussels. He joined the Johanniterorden in 1984 and in 1995 he was nominated Rechtsritter. From 2002 to 2012 he was the chairman of the Brussels Johanniter Group (Subkommende). Since June 2014 he has been the governing commander of the Balley.

Dr Anne Coleman MD, PhD, OStJ
Dr Anne L. Coleman MD PhD is a Professor of Ophthalmology in the Stein Eye Institute of the David Geffen School of Medicine at UCLA and also a Professor of Epidemiology. She is Vice-Chair for Academic Affairs for the Department of Ophthalmology and Director of the SEI Centre for Community Outreach and Policy, overseeing both the UCLA Mobile Eye Clinic and the UCLA Centre for Eye Epidemiology.

Dr Alastair McPhail CMG OBE
Dr Alastair McPhail has worked for the Foreign and Commonwealth Office for 21 years. In January 2014 he was appointed British Consul General to Jerusalem. He has had an illustrious career within the FCO serving in a number of European, Middle Eastern, and African Countries.

Dr Michael Nelson MBChB FRCOphth MAEd OStJ (Retired)
Dr Michael Nelson was a consultant ophthalmologist in Sheffield between 1990 and 2015. He is an Associate Postgraduate Dean for Health Education England working across Yorkshire and the Humber, Academic Lead for Innovation and Development and Director of Student Affairs for Sheffield Medical School and Education Advisor for the Royal College of Ophthalmologists. He retired from the SJEHG Board in March 2016.

Mr Nick Astbury FRCs FRCOphth FRCP CSJ (Retired)
Nick Astbury is a recently retired consultant paediatric ophthalmologist who served as president of the Royal College of Ophthalmologists from 2003-6. Nick currently works part-time at the International Centre for Eye Health at the London School of Hygiene and Tropical Medicine as a senior Clinical Lecturer and is particularly involved with the VISION 2020 LINKS programme and the Journal of Community Eye Health. Other current roles include member of the RCOphth International Committee, trustee of the Impact Foundation and the Keeler Scholarship Trust, co-chair of IAPB Europe, and chair of the Duke-Elder Fund. He retired from the SJEHG board in June 2015.

Ms Victoria M. Sheffield DStJ (Retired)
Victoria M. Sheffield is President and CEO of the International Eye Foundation in the USA. She is Vice President of the International Agency for the Prevention of Blindness, a member of the American Academy of Ophthalmology’s Global Outreach Committee, and is Vice Chair of the International Paediatric Ophthalmology and Strabismus Council’s Advisory Board. She retired from the SJEHG board in June 2015.

Co-opted Committee Members who are not Trustees

<table>
<thead>
<tr>
<th>Name</th>
<th>Role</th>
</tr>
</thead>
<tbody>
<tr>
<td>David Verity</td>
<td>Clinical Governance</td>
</tr>
<tr>
<td>Jamie Ingham Clark</td>
<td>Finance</td>
</tr>
<tr>
<td>Timothy Walker</td>
<td>Audit</td>
</tr>
<tr>
<td>Sir Vincent Fean</td>
<td>Fundraising</td>
</tr>
<tr>
<td>Mark Cannon Brookes</td>
<td>Investment</td>
</tr>
<tr>
<td>Ken Baksh</td>
<td>Investment</td>
</tr>
<tr>
<td>Philip Hardaker</td>
<td>Honours and Awards</td>
</tr>
<tr>
<td>Sheenah Davies</td>
<td>Honours and Awards</td>
</tr>
<tr>
<td>Robin Oake</td>
<td>Honours and Awards</td>
</tr>
</tbody>
</table>
SJEHG is an English company limited by guarantee. 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 Clinic, as well as our Mobile Outreach Programme. The Board also considers and approves the operational and capital budgets.

The Board has established levels of authority to ensure proper accountability and transparency. 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.

New Trustees are selected by the Board to maintain an appropriate balance of skills and experience. Trustees are appointed for a term of three years and may be reappointed for two further terms of three years, but are not normally eligible for a further reappointment. An induction programme is in place for new directors.

The Board of Trustees delegate responsibility for the daily management of the Charity to the Chief Executive, Brigadier Tom Ogilvie-Graham, and the Medical Director, Dr Jeanne Garth.

Governance Structure

Board Committees:
Steering
Strategy & Planning
Clinical Governance
Finance
Audit
Fundraising*
Investment
Honours & Awards

Each committee has terms of reference, which were updated in 2013. * The Guild, a longstanding voluntary fundraising group, is a subcommittee of the Fundraising Committee.

Chief Executive
Brigadier Tom Ogilvie-Graham
MBE CStJ PhD

Tom Ogilvie-Graham served in the British army for 30 years, primarily with the Army Medical Services and with the Household Cavalry.

His humanitarian work spans from Kuwait to Bosnia to Rwanda, as well as developing programmes for medical and public health support in Iraq and Afghanistan. He has represented the UK on NATO medical committees. He is a Barrister and a Fulbright Scholar at Cornell University, and has a Doctorate in Psychology from Edinburgh University, a Master of Science from Reading University, and a Bachelor degree in Veterinary Medicine & Surgery from Edinburgh University.

Medical Director
Dr. Jeanne Garth
FRCSEd

Dr. Jeanne Garth was born in Bahrain, and obtained her Medical Degree from Bombay University, India in 1978.

In 1980, she joined the department of Ophthalmology of the Salmaniya Medical Centre in Bahrain, which is recognised by the London, Edinburgh, Glasgow and Irish Royal Colleges for training in ophthalmology. She continued her training in Dublin and obtained a fellowship from the Royal College of Surgeons, Edinburgh.

Dr. Garth joined SJEHG as a Consultant Ophthalmic Surgeon in 2001 and became Medical Director in February 2002.
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 Annual Report and the financial statements in accordance with applicable law and regulations.

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 Generally Accepted Accounting Practice (United Kingdom Accounting Standards and applicable law). 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 Charities SORP;
- make judgments and estimates that are reasonable and prudent;
- state whether applicable UK Accounting Standards 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.

In so far as the Trustees are aware:

- there is no relevant audit information of which the charitable company’s auditors are unaware; and
- the Trustees have taken all the steps that they ought to have taken as a trustee in order to make themselves aware of any relevant audit information and to establish that the charitable company’s auditors are aware of that information.

The Trustees 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.

Approved by the Board of Trustees and signed on its behalf by:

J.N. Woolf  
Chairman, Board of Trustees  
St John of Jerusalem Eye Hospital Group  
Company no. 7355619  
Charity no. 1139527  
10 May 2016
Independent Auditors’ Report to the members of St John of Jerusalem Eye Hospital Group

Report on the financial statements

Our opinion

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

- give a true and fair view of the state of the group's and of the parent charitable company's affairs as at 31 December 2015 and of the group's incoming resources and application of resources, including its income and expenditure, and of the group's cash flows for the year then ended;

- have been properly prepared in accordance with United Kingdom Generally Accepted Accounting Practice; and

- have been prepared in accordance with the requirements of the Companies Act 2006.

What we have audited

The financial statements, included within the Trustees’ Annual Report (the “Annual Report”), comprise:

- the group and parent charitable company balance sheets as at 31 December 2015;

- the group summary income and expenditure account for the year then ended;

- the group cash flow statement for the year then ended; and

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

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

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

Opinion on other matter prescribed by the Companies Act 2006

In our opinion the information given in the Annual Report, including the Strategic Report, for the financial year for which the financial statements are prepared is consistent with the financial statements.

Other matters on which we are required to report by exception

Adequacy of accounting records and information and explanations received

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

- we have not received all the information and explanations we require for our audit; or

- adequate accounting records have not been kept by the parent charitable company, or returns adequate for our audit have not been received from branches not visited by us; or

- the parent charitable company financial statements are not in agreement with the accounting records and returns.

We have no exceptions to report arising from this responsibility.

Trustees’ remuneration

Under the Companies Act 2006 we are required to report to you if, in our opinion, certain
Responsibilities for the financial statements and the audit

Our responsibilities and those of the trustees

As explained more fully in the Statement of Trustees’ Responsibilities set out on page 23, the trustees are responsible for the preparation of the financial statements and for being satisfied that they give a true and fair view.

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

This report, including the opinions, has been prepared for and only for the charity’s members and trustees as a body in accordance with Chapter 3 of Part 16 of the Companies Act 2006 and for no other purpose. We do not, in giving these opinions, accept or assume responsibility for any other purpose or to any other person to whom this report is shown or into whose hands it may come save where expressly agreed by our prior consent in writing.

What an audit of financial statements involves

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

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

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

In addition, we read all the financial and non-financial information in the Annual Report to identify material inconsistencies with the audited financial statements and to identify any information that is apparently materially incorrect based on, or materially inconsistent with, the knowledge acquired by us in the course of performing the audit. If we become aware of any apparent material misstatements or inconsistencies we consider the implications for our report.

Andrew Lowe
(Senior Statutory Auditor)
for and on behalf of
PricewaterhouseCoopers LLP
Chartered Accountants and Statutory Auditors
London
10 May 2016
SJEHG Financial Statements
Consolidated Statement of Financial Activities
for the year ended 31 December 2015

Unrestricted Restricted Endowment Total Total
Funds Funds Funds Funds Funds

<table>
<thead>
<tr>
<th>Notes</th>
<th>2015 £'000</th>
<th>2015 £'000</th>
<th>2015 £'000</th>
<th>2015 £'000</th>
<th>2014 £'000</th>
</tr>
</thead>
</table>

Income and Endowments

Donations and legacies 3 1,703 2,895 - 4,598 5,336
Income from investments 50 97 - 147 123
Income from charitable activities 3,776 - - 3,776 3,831

Total Income and Endowments 5,529 2,992 - 8,521 9,290

Resources Expended

Expenditure on generating funds (622) - - (622) (476)
Expenditure on charitable activities (4,975) (2,432) - (7,407) (7,054)
Other expenditure (170) - - (170) (164)

Total Resources Expended (5,767) (2,432) - (8,199) (7,694)

Net (losses) / gains on investments 8, 14 (4) - 10 6 195

Net (Expenditure) / Income (242) 560 10 328 1,791

Transfers between funds 12,13 927 (927) - -
Exchange gains/(losses) on overseas activities 179 - - 179 (169)

Net Movement in Funds 864 (367) 10 507 1,622

Fund balances brought forward at 1 January 5,954 2,231 5,908 14,093 12,471

Fund balances carried forward at 31 December 15 6,818 1,864 5,918 14,600 14,093

All gains and losses recognised in the year are included in the statement of financial activities.

Group Income and Expenditure Account for the year ended 31 December 2015

<table>
<thead>
<tr>
<th></th>
<th>2015 £’000</th>
<th>2014 £’000</th>
</tr>
</thead>
<tbody>
<tr>
<td>Income</td>
<td>8,521</td>
<td>9,290</td>
</tr>
<tr>
<td>Expenditure</td>
<td>(8,199)</td>
<td>(7,694)</td>
</tr>
<tr>
<td>Realised gains on investments</td>
<td>-</td>
<td>29</td>
</tr>
<tr>
<td>Net income</td>
<td>322</td>
<td>1,625</td>
</tr>
</tbody>
</table>

All the above results are derived from continuing activities.

The accounting policies and the notes on pages 29 to 40 form part of these financial statements.

The income and expenditure account excludes the unrealised investment and exchange gains/losses shown in the Statement of Financial Activities.
**SJEHG Financial Statements**  
**Balance Sheets**  
**31 December 2015**

<table>
<thead>
<tr>
<th>Notes</th>
<th>Group 2015 '000</th>
<th>Group 2014 '000</th>
<th>Charity 2015 '000</th>
<th>Charity 2014 '000</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Fixed Assets</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Tangible assets</td>
<td>7</td>
<td>4,232</td>
<td>3,371</td>
<td>6</td>
</tr>
<tr>
<td>Investments</td>
<td>8</td>
<td>10,237</td>
<td>10,158</td>
<td>8,909</td>
</tr>
<tr>
<td><strong>Total Fixed Assets</strong></td>
<td></td>
<td>14,469</td>
<td>13,529</td>
<td>8,915</td>
</tr>
<tr>
<td><strong>Current Assets</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Stocks and work in progress</td>
<td>9</td>
<td>364</td>
<td>402</td>
<td>-</td>
</tr>
<tr>
<td>Debtors</td>
<td>10</td>
<td>1,730</td>
<td>1,324</td>
<td>63</td>
</tr>
<tr>
<td>Cash at bank and in hand</td>
<td>3,009</td>
<td>3,180</td>
<td>1,243</td>
<td>1,605</td>
</tr>
<tr>
<td><strong>Total Current Assets</strong></td>
<td></td>
<td>5,103</td>
<td>4,906</td>
<td>1,306</td>
</tr>
<tr>
<td>Creditors: Amounts falling due within one year</td>
<td>11</td>
<td>(1,519)</td>
<td>(1,408)</td>
<td>(36)</td>
</tr>
<tr>
<td><strong>Net Current Assets</strong></td>
<td></td>
<td>3,584</td>
<td>3,498</td>
<td>1,270</td>
</tr>
<tr>
<td><strong>Total Assets Less Current Liabilities</strong></td>
<td></td>
<td>18,053</td>
<td>17,027</td>
<td>10,185</td>
</tr>
<tr>
<td>Creditors: Amounts falling due after more than one year</td>
<td>11</td>
<td>(3,453)</td>
<td>(2,934)</td>
<td>-</td>
</tr>
<tr>
<td><strong>Net Assets</strong></td>
<td></td>
<td>14,600</td>
<td>14,093</td>
<td>10,185</td>
</tr>
</tbody>
</table>

**The Funds of the Group and Charity**

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Restricted income funds</strong></td>
<td>13</td>
<td>1,864</td>
<td>2,231</td>
<td>432</td>
</tr>
<tr>
<td><strong>Endowment funds</strong></td>
<td>14</td>
<td>5,918</td>
<td>5,908</td>
<td>5,918</td>
</tr>
<tr>
<td><strong>Unrestricted income funds</strong></td>
<td>12</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Designated</td>
<td>4,232</td>
<td>3,371</td>
<td>6</td>
<td>5</td>
</tr>
<tr>
<td>Revaluation reserve</td>
<td>146</td>
<td>135</td>
<td>146</td>
<td>135</td>
</tr>
<tr>
<td>General reserves</td>
<td>2,440</td>
<td>2,448</td>
<td>3,683</td>
<td>3,949</td>
</tr>
<tr>
<td>Unrestricted income funds</td>
<td>6,818</td>
<td>5,954</td>
<td>3,835</td>
<td>4,089</td>
</tr>
<tr>
<td><strong>Total Funds of the Group and Charity</strong></td>
<td>15</td>
<td>14,600</td>
<td>14,093</td>
<td>10,185</td>
</tr>
</tbody>
</table>

The accounting policies and the notes on pages 29 to 40 form part of these financial statements.  
The financial statements were approved by the Trustees on 10 May 2016 and signed on their behalf by:

Nicholas Woolf KStJ  
Chairman

Nicholas Goulding OStJ  
Treasurer
## SJEHG Financial Statements
### Consolidated Cash Flow Statement
#### for the year ended 31 December 2015

<table>
<thead>
<tr>
<th>Notes</th>
<th>2015 £’000</th>
<th>2014 £’000</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Net cash inflow from operating activities</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>16</td>
<td>1,149</td>
</tr>
<tr>
<td><strong>Cash flows from investing activities</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Investment income</td>
<td></td>
<td>147</td>
</tr>
<tr>
<td>Purchase of tangible fixed assets</td>
<td>7</td>
<td>(1,400)</td>
</tr>
<tr>
<td>Proceeds from disposal of tangible fixed assets</td>
<td></td>
<td>6</td>
</tr>
<tr>
<td>Net purchase of fixed asset investments</td>
<td>8</td>
<td>(77)</td>
</tr>
<tr>
<td>Proceeds from sale of fixed asset investments</td>
<td>8</td>
<td>4</td>
</tr>
<tr>
<td><strong>Net cash outflow from investing activities</strong></td>
<td></td>
<td>(1,320)</td>
</tr>
<tr>
<td><strong>Cash flows from financing activities</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Inflows from movement of short term deposits</td>
<td>-</td>
<td>9</td>
</tr>
<tr>
<td><strong>Net cash inflow from financing activities</strong></td>
<td></td>
<td>-</td>
</tr>
<tr>
<td><strong>Change in cash and cash equivalents in the reporting period</strong></td>
<td>(171)</td>
<td>802</td>
</tr>
<tr>
<td>Cash at bank and in hand at 1 January</td>
<td></td>
<td>3,180</td>
</tr>
<tr>
<td>(Decrease) / increase in cash in the year</td>
<td>(171)</td>
<td>802</td>
</tr>
<tr>
<td><strong>Cash at bank and in hand at 31 December</strong></td>
<td></td>
<td>3,009</td>
</tr>
</tbody>
</table>

The accounting policies and the notes on pages 29 to 40 form part of these financial statements.
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 Charities Act 2011 and the Companies Act 2006.

FRS 102 was adopted for the first time for the year ended 31 December 2015. In preparing the financial statements, the trustees have considered whether in applying the accounting policies required by FRS 102 and the Charities SORP FRS 102, a restatement of comparative items for the year ended 31 December 2014 was needed. No restatements were required.

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.

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.

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 these resources. The irrecoverable value added tax is included with the item of expense to which it relates.

f Costs of generating funds
These include the salaries and direct expenditure costs of the staff who primarily promote fundraising.

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

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

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

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

j Pension and other end of service costs
The amount charged in the Statement of Financial Affairs 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.
1 Principal Accounting Policies (continued)

k Taxation
The Charity and each group entity are 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.

l 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 £2,000 are expensed in the year in which they are incurred. Impairment reviews are only carried out if there is an indication that the recoverable amount of an asset is below its net book value. Depreciation on fixed assets is provided at rates estimated to write off the cost, less estimated residual value, of each asset over its expected useful life on a straight line basis, as follows:

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

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

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

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

p Funds
Unrestricted funds are funds which are generally available for the Group to carry out its charitable objectives; these include designated funds, which are amounts that have been set aside to finance fixed assets. Restricted funds are funds which are subject to specific conditions imposed by the donors.

Endowment funds are capital funds where the capital cannot be spent in the normal course of activities, although the income is added to restricted or unrestricted funds depending on the terms of the original endowment.

q Estimates and assumptions
The preparation of financial statements in conformity with generally accepted accounting principles requires the use of estimates and assumptions that affect the reported amounts of assets and liabilities at the date of the financial statements and the reported amounts of income and expenditure during the reporting period. Although these amounts are based on trustees' best estimates of the amount, events or actions may mean that actual results ultimately differ from those estimates, and these differences may be material.

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

3 Voluntary Income

<table>
<thead>
<tr>
<th></th>
<th>Unrestricted</th>
<th>Restricted</th>
<th>2015 Total</th>
<th>Unrestricted</th>
<th>Restricted</th>
<th>2014 Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Donations and gifts</td>
<td>1,191</td>
<td>2,895</td>
<td>4,086</td>
<td>1,124</td>
<td>4,004</td>
<td>5,128</td>
</tr>
<tr>
<td>Legacies</td>
<td>327</td>
<td>-</td>
<td>327</td>
<td>147</td>
<td>-</td>
<td>147</td>
</tr>
<tr>
<td>Donations in kind</td>
<td>185</td>
<td>185</td>
<td>370</td>
<td>61</td>
<td>-</td>
<td>61</td>
</tr>
</tbody>
</table>

Donations in kind includes the estimated market cost of medical services donated by visiting doctors to the Jerusalem Hospital £11,000 (2014, £2,000); the value of donated tangible assets and medical supplies was £174,000 (2014, £59,000). Income from related parties is set out in note 18.
4 Incoming Resources from Charitable Activities

<table>
<thead>
<tr>
<th></th>
<th>2015</th>
<th>2014</th>
</tr>
</thead>
<tbody>
<tr>
<td>Outpatient income</td>
<td>1,553</td>
<td>1,619</td>
</tr>
<tr>
<td>Surgical income</td>
<td>2,522</td>
<td>2,728</td>
</tr>
<tr>
<td>Less: Patient Relief</td>
<td>(494)</td>
<td>(727)</td>
</tr>
<tr>
<td>Net patient related income</td>
<td><strong>3,581</strong></td>
<td><strong>3,620</strong></td>
</tr>
<tr>
<td>Other hospital income</td>
<td>37</td>
<td>50</td>
</tr>
<tr>
<td>Rental income, board and lodging</td>
<td>158</td>
<td>161</td>
</tr>
<tr>
<td>Total other income</td>
<td>195</td>
<td>211</td>
</tr>
<tr>
<td>Total income from charitable activities</td>
<td><strong>3,776</strong></td>
<td><strong>3,831</strong></td>
</tr>
</tbody>
</table>

Patient Relief represents subsidies and exemptions to cover the value of medical services rendered when payment is waived by the Charity 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

<table>
<thead>
<tr>
<th>Costs of Generating Funds</th>
<th>Costs of Generating Funds</th>
<th>Charitable Activities</th>
<th>Charitable Activities</th>
<th>Governance Costs</th>
<th>Governance Costs</th>
<th>Total Costs</th>
<th>Total Costs</th>
</tr>
</thead>
<tbody>
<tr>
<td>2015 £'000</td>
<td>2014 £'000</td>
<td>2015 £'000</td>
<td>2014 £'000</td>
<td>2015 £'000</td>
<td>2014 £'000</td>
<td>2015 £'000</td>
<td>2014 £'000</td>
</tr>
<tr>
<td>Personnel costs (note 6)</td>
<td>281 273</td>
<td>4,661 4,418</td>
<td>45 68</td>
<td>4,087 4,759</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Medical costs</td>
<td>- -</td>
<td>1,284 1,272</td>
<td>- -</td>
<td>1,284 1,272</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Establishment costs</td>
<td>80 67</td>
<td>497 496</td>
<td>16 15</td>
<td>593 578</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Depreciation</td>
<td>5 4</td>
<td>694 662</td>
<td>1 1</td>
<td>700 667</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Office expenses</td>
<td>38 19</td>
<td>144 147</td>
<td>4 2</td>
<td>186 168</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Travel and subsistence</td>
<td>92 15</td>
<td>63 112</td>
<td>9 12</td>
<td>164 139</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Marketing and publicity</td>
<td>104 97</td>
<td>- -</td>
<td>- -</td>
<td>104 97</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Auditors' remuneration</td>
<td>- -</td>
<td>- -</td>
<td>58 51</td>
<td>58 51</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other professional fees</td>
<td>22 1</td>
<td>3 11</td>
<td>15 63</td>
<td>63 27</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Legal fees</td>
<td>- -</td>
<td>35 24</td>
<td>- -</td>
<td>35 24</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Finance costs</td>
<td>- -</td>
<td>26 (88)</td>
<td>(1)</td>
<td>25 (88)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Support costs included above</td>
<td>- -</td>
<td>890 808</td>
<td>52 36</td>
<td>942 844</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Total resources expended in 2014 of £7,694,000 comprise £4,653,000 for unrestricted funds and £2,401,000 for restricted funds.

Support costs comprise:

<table>
<thead>
<tr>
<th></th>
<th>2015 £'000</th>
<th>2014 £'000</th>
</tr>
</thead>
<tbody>
<tr>
<td>Personnel costs</td>
<td>352</td>
<td>334</td>
</tr>
<tr>
<td>Establishment costs</td>
<td>261</td>
<td>260</td>
</tr>
<tr>
<td>Depreciation</td>
<td>70</td>
<td>67</td>
</tr>
<tr>
<td>Office expenses</td>
<td>147</td>
<td>149</td>
</tr>
<tr>
<td>Travel and subsistence</td>
<td>63</td>
<td>112</td>
</tr>
<tr>
<td>Other professional fees</td>
<td>23</td>
<td>9</td>
</tr>
<tr>
<td>Finance costs</td>
<td>26 (87)</td>
<td>26 (87)</td>
</tr>
<tr>
<td>Support costs</td>
<td>942</td>
<td>844</td>
</tr>
</tbody>
</table>

Auditors' remuneration (excluding VAT):

<table>
<thead>
<tr>
<th></th>
<th>2015 £</th>
<th>2014 £</th>
</tr>
</thead>
<tbody>
<tr>
<td>External audit</td>
<td>36,307</td>
<td>31,301</td>
</tr>
<tr>
<td>Other services provided by external auditors</td>
<td>30,588</td>
<td>8,046</td>
</tr>
<tr>
<td>Sub-total</td>
<td>66,895</td>
<td>39,347</td>
</tr>
<tr>
<td>Internal audit</td>
<td>9,190</td>
<td>8,491</td>
</tr>
<tr>
<td>Total</td>
<td>76,085</td>
<td>47,838</td>
</tr>
</tbody>
</table>
6 Employee Information

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

<table>
<thead>
<tr>
<th>Function</th>
<th>2015 Number</th>
<th>2014 Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Medical and nursing</td>
<td>143</td>
<td>138</td>
</tr>
<tr>
<td>Support services</td>
<td>50</td>
<td>47</td>
</tr>
<tr>
<td>Fundraising</td>
<td>8</td>
<td>6</td>
</tr>
<tr>
<td>Administration</td>
<td>35</td>
<td>34</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>236</strong></td>
<td><strong>225</strong></td>
</tr>
</tbody>
</table>

a Staff costs

<table>
<thead>
<tr>
<th>Description</th>
<th>2015 £'000</th>
<th>2014 £'000</th>
</tr>
</thead>
<tbody>
<tr>
<td>Wages and salaries</td>
<td>4,414</td>
<td>4,239</td>
</tr>
<tr>
<td>Social security costs</td>
<td>345</td>
<td>338</td>
</tr>
<tr>
<td>Other pension costs</td>
<td>170</td>
<td>167</td>
</tr>
<tr>
<td>Other costs</td>
<td>58</td>
<td>15</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>4,987</strong></td>
<td><strong>4,759</strong></td>
</tr>
</tbody>
</table>

b Employees’ emoluments

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

<table>
<thead>
<tr>
<th>Band</th>
<th>2015 Number</th>
<th>2014 Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>£140,001 - £150,000</td>
<td>-</td>
<td>1</td>
</tr>
<tr>
<td>£130,001 - £140,000</td>
<td>1</td>
<td>-</td>
</tr>
<tr>
<td>£100,001 - £120,000</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>£80,001 - £90,000</td>
<td>1</td>
<td>-</td>
</tr>
<tr>
<td>£70,001 - £80,000</td>
<td>-</td>
<td>1</td>
</tr>
<tr>
<td>£60,001 - £70,000</td>
<td>3</td>
<td>3</td>
</tr>
</tbody>
</table>

During the year, provident benefits and pension contributions on behalf of these staff amounted to £10,919 (2014, £12,553).

c Remuneration received by key management personnel

The remuneration (salaries and benefits) received by the 11 senior management personnel in managing the daily operations amounted to £689,000 (2014, £621,000).

d Pension costs

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

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

#### a Group

<table>
<thead>
<tr>
<th></th>
<th>Buildings &amp; Improvements £'000</th>
<th>Medical Equipment £'000</th>
<th>Motor Vehicles £'000</th>
<th>Other Assets £'000</th>
<th>Total £'000</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 January 2015</td>
<td>3,251</td>
<td>4,491</td>
<td>147</td>
<td>1,439</td>
<td>9,328</td>
</tr>
<tr>
<td>Additions</td>
<td>837</td>
<td>296</td>
<td>60</td>
<td>207</td>
<td>1,400</td>
</tr>
<tr>
<td>Exchange differences</td>
<td>180</td>
<td>225</td>
<td>8</td>
<td>73</td>
<td>486</td>
</tr>
<tr>
<td>Disposals</td>
<td>-</td>
<td>-</td>
<td>(45)</td>
<td>-</td>
<td>(45)</td>
</tr>
<tr>
<td>31 December 2015</td>
<td><strong>4,268</strong></td>
<td><strong>5,012</strong></td>
<td><strong>170</strong></td>
<td><strong>1,719</strong></td>
<td><strong>11,169</strong></td>
</tr>
</tbody>
</table>

#### Depreciation

<table>
<thead>
<tr>
<th></th>
<th>Buildings &amp; Improvements £'000</th>
<th>Medical Equipment £'000</th>
<th>Motor Vehicles £'000</th>
<th>Other Assets £'000</th>
<th>Total £'000</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 January 2015</td>
<td>1,962</td>
<td>2,972</td>
<td>77</td>
<td>946</td>
<td>5,957</td>
</tr>
<tr>
<td>Charge for the year</td>
<td>145</td>
<td>403</td>
<td>32</td>
<td>120</td>
<td>700</td>
</tr>
<tr>
<td>Exchange differences</td>
<td>99</td>
<td>154</td>
<td>4</td>
<td>47</td>
<td>304</td>
</tr>
<tr>
<td>Disposals</td>
<td>-</td>
<td>-</td>
<td>(24)</td>
<td>-</td>
<td>(24)</td>
</tr>
<tr>
<td>31 December 2015</td>
<td><strong>2,206</strong></td>
<td><strong>3,529</strong></td>
<td><strong>89</strong></td>
<td><strong>1,113</strong></td>
<td><strong>6,937</strong></td>
</tr>
</tbody>
</table>

#### Net Book Value

<table>
<thead>
<tr>
<th></th>
<th>Buildings &amp; Improvements £'000</th>
<th>Medical Equipment £'000</th>
<th>Motor Vehicles £'000</th>
<th>Other Assets £'000</th>
<th>Total £'000</th>
</tr>
</thead>
<tbody>
<tr>
<td>31 December 2015</td>
<td><strong>2,062</strong></td>
<td><strong>1,483</strong></td>
<td><strong>81</strong></td>
<td><strong>606</strong></td>
<td><strong>4,232</strong></td>
</tr>
<tr>
<td>31 December 2014</td>
<td><strong>1,289</strong></td>
<td><strong>1,519</strong></td>
<td><strong>70</strong></td>
<td><strong>493</strong></td>
<td><strong>3,371</strong></td>
</tr>
</tbody>
</table>

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

#### b Charity

<table>
<thead>
<tr>
<th></th>
<th>Buildings &amp; Improvements £'000</th>
<th>Medical Equipment £'000</th>
<th>Motor Vehicles £'000</th>
<th>Other Assets £'000</th>
<th>Total £'000</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 January 2015</td>
<td>40</td>
<td>40</td>
<td></td>
<td>40</td>
<td>80</td>
</tr>
<tr>
<td>Additions</td>
<td>7</td>
<td>7</td>
<td></td>
<td>7</td>
<td>7</td>
</tr>
<tr>
<td>31 December 2015</td>
<td>47</td>
<td>47</td>
<td></td>
<td>47</td>
<td>94</td>
</tr>
</tbody>
</table>

#### Depreciation

<table>
<thead>
<tr>
<th></th>
<th>Buildings &amp; Improvements £'000</th>
<th>Medical Equipment £'000</th>
<th>Motor Vehicles £'000</th>
<th>Other Assets £'000</th>
<th>Total £'000</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 January 2015</td>
<td>35</td>
<td>35</td>
<td></td>
<td>35</td>
<td>75</td>
</tr>
<tr>
<td>Charge for the year</td>
<td>6</td>
<td>6</td>
<td></td>
<td>6</td>
<td>6</td>
</tr>
<tr>
<td>31 December 2015</td>
<td>41</td>
<td>41</td>
<td></td>
<td>41</td>
<td>82</td>
</tr>
</tbody>
</table>

#### Net Book Value

<table>
<thead>
<tr>
<th></th>
<th>Buildings &amp; Improvements £'000</th>
<th>Medical Equipment £'000</th>
<th>Motor Vehicles £'000</th>
<th>Other Assets £'000</th>
<th>Total £'000</th>
</tr>
</thead>
<tbody>
<tr>
<td>31 December 2015</td>
<td>6</td>
<td>6</td>
<td></td>
<td>6</td>
<td>12</td>
</tr>
<tr>
<td>31 December 2014</td>
<td>5</td>
<td>5</td>
<td></td>
<td>5</td>
<td>10</td>
</tr>
</tbody>
</table>
## 8 Investments

### a Group

<table>
<thead>
<tr>
<th></th>
<th>Bank Deposits £'000</th>
<th>Listed Investments £'000</th>
<th>Total £'000</th>
</tr>
</thead>
<tbody>
<tr>
<td>Market value at 1 January 2015</td>
<td>590</td>
<td>9,568</td>
<td>10,158</td>
</tr>
<tr>
<td>Additions</td>
<td>200</td>
<td>233</td>
<td>433</td>
</tr>
<tr>
<td>Withdrawals</td>
<td>-</td>
<td>(356)</td>
<td>(356)</td>
</tr>
<tr>
<td>Disposals</td>
<td>-</td>
<td>(4)</td>
<td>(4)</td>
</tr>
<tr>
<td>Unrealised gains</td>
<td>-</td>
<td>6</td>
<td>6</td>
</tr>
<tr>
<td>Market value at 31 December 2015</td>
<td>790</td>
<td>9,447</td>
<td>10,237</td>
</tr>
<tr>
<td>Historical cost at 31 December 2015</td>
<td>790</td>
<td>8,995</td>
<td>9,785</td>
</tr>
</tbody>
</table>

### b Charity

<table>
<thead>
<tr>
<th></th>
<th>Listed Investments £'000</th>
<th>Total £'000</th>
</tr>
</thead>
<tbody>
<tr>
<td>Market value at 1 January 2015</td>
<td>9,116</td>
<td>9,116</td>
</tr>
<tr>
<td>Additions</td>
<td>150</td>
<td>150</td>
</tr>
<tr>
<td>Withdrawals</td>
<td>(356)</td>
<td>(356)</td>
</tr>
<tr>
<td>Disposals</td>
<td>(4)</td>
<td>(4)</td>
</tr>
<tr>
<td>Unrealised gains</td>
<td>3</td>
<td>3</td>
</tr>
<tr>
<td>Market value at 31 December 2015</td>
<td>8,909</td>
<td>8,909</td>
</tr>
<tr>
<td>Historical cost at 31 December 2015</td>
<td>8,480</td>
<td>8,480</td>
</tr>
</tbody>
</table>

### c Listed investments

**Analysis by category of underlying holding and location**

<table>
<thead>
<tr>
<th></th>
<th>2015 Group £'000</th>
<th>2015 Charity £'000</th>
<th>2014 Group £'000</th>
<th>2014 Charity £'000</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Equity investments</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>- UK</td>
<td>2,806</td>
<td>2,806</td>
<td>2,778</td>
<td>2,778</td>
</tr>
<tr>
<td>- Overseas</td>
<td>2,212</td>
<td>2,212</td>
<td>2,194</td>
<td>2,194</td>
</tr>
<tr>
<td><strong>Fixed interest securities</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>- UK</td>
<td>209</td>
<td>209</td>
<td>452</td>
<td>452</td>
</tr>
<tr>
<td>- Overseas</td>
<td>489</td>
<td>489</td>
<td>450</td>
<td>450</td>
</tr>
<tr>
<td><strong>Property Unit Trusts</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>- UK</td>
<td>46</td>
<td>46</td>
<td>49</td>
<td>49</td>
</tr>
<tr>
<td>- Overseas</td>
<td>1,160</td>
<td>1,160</td>
<td>987</td>
<td>987</td>
</tr>
<tr>
<td><strong>Hedge Funds</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>- US</td>
<td>5</td>
<td>5</td>
<td>8</td>
<td>8</td>
</tr>
<tr>
<td><strong>Sterling &amp; Cash Instruments</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>- UK</td>
<td>1,982</td>
<td>1,982</td>
<td>2,198</td>
<td>2,198</td>
</tr>
<tr>
<td>- Overseas</td>
<td>538</td>
<td></td>
<td>452</td>
<td></td>
</tr>
<tr>
<td><strong>Others</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>9,447</td>
<td>8,909</td>
<td>9,568</td>
<td>9,116</td>
</tr>
</tbody>
</table>

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.

At 31 December 2015, the following pooled funds represented more than 5% of the total investment portfolio:
SJEGHG Financial Statements
Notes to the Financial Statements
for the year ended 31 December 2015

8 Investments (continued)

  c Listed investments (continued):

At 31 December 2015, the following pooled funds represented more than 5% of the total investment portfolio:

<table>
<thead>
<tr>
<th>Group &amp; Charity</th>
<th>2015</th>
<th>2014</th>
</tr>
</thead>
<tbody>
<tr>
<td>Artemis UK Special Situations Fund</td>
<td>9.0%</td>
<td>8.4%</td>
</tr>
<tr>
<td>Vanguard S&amp;P 500 UCITS ETF</td>
<td>9.0%</td>
<td>8.4%</td>
</tr>
<tr>
<td>Schroders QEP Global Active Value Fund</td>
<td>8.8%</td>
<td>8.8%</td>
</tr>
<tr>
<td>Schroder Income Fund</td>
<td>8.7%</td>
<td>9.4%</td>
</tr>
<tr>
<td>AXA Framlington UK Select Opportunities Fund</td>
<td>7.1%</td>
<td>6.4%</td>
</tr>
<tr>
<td>Trojan Fund</td>
<td>6.9%</td>
<td>6.8%</td>
</tr>
<tr>
<td>CF Ruffer Total Return Fund</td>
<td>6.6%</td>
<td>6.8%</td>
</tr>
<tr>
<td>Majedie UK Equity Fund</td>
<td>6.3%</td>
<td>6.3%</td>
</tr>
<tr>
<td>Aberdeen Foundation Growth Fund</td>
<td>5.9%</td>
<td>5.8%</td>
</tr>
<tr>
<td>Property Income Trust for Charities</td>
<td>5.8%</td>
<td>5.2%</td>
</tr>
</tbody>
</table>

  d Bank deposits

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

  e Investment in subsidiaries

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

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

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

Summary of financial information for the subsidiary entities:

<table>
<thead>
<tr>
<th></th>
<th>St John Eye Hospital in Jerusalem( RA) 2015 £’000</th>
<th>St John of Jerusalem Eye Hospital 2015 £’000</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total incoming resources</td>
<td>4,915</td>
<td>1,458</td>
</tr>
<tr>
<td>Total resources expended</td>
<td>(6,394)</td>
<td>(1,243)</td>
</tr>
<tr>
<td>Net (outgoing) / incoming resources before other recognised gains</td>
<td>(1,479)</td>
<td>215</td>
</tr>
<tr>
<td>Other recognised gains</td>
<td>97</td>
<td>83</td>
</tr>
<tr>
<td>Net movements in funds</td>
<td>(1,382)</td>
<td>298</td>
</tr>
<tr>
<td>Total assets</td>
<td>6,638</td>
<td>3,014</td>
</tr>
<tr>
<td>Total liabilities</td>
<td>(4,176)</td>
<td>(951)</td>
</tr>
<tr>
<td>Total funds</td>
<td>2,462</td>
<td>2,063</td>
</tr>
</tbody>
</table>
Notes to the Financial Statements
for the year ended 31 December 2015

9 Stocks and work in progress

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

10 a Debtors

<table>
<thead>
<tr>
<th>Note</th>
<th>Group 2015 £'000</th>
<th>Group 2014 £'000</th>
<th>Charity 2015 £'000</th>
<th>Charity 2014 £'000</th>
</tr>
</thead>
<tbody>
<tr>
<td>Trade debtors</td>
<td>1,316</td>
<td>1,020</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>Allowance for bad debts</td>
<td>(212)</td>
<td>(167)</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Net trade debtors</td>
<td>1,104</td>
<td>853</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>Donations receivable</td>
<td>532</td>
<td>349</td>
<td>38</td>
<td>10</td>
</tr>
<tr>
<td>Other debtors</td>
<td>1</td>
<td>9</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Prepayments and accrued income</td>
<td>93</td>
<td>113</td>
<td>24</td>
<td>12</td>
</tr>
<tr>
<td>Total debtors</td>
<td>1,730</td>
<td>1,324</td>
<td>63</td>
<td>24</td>
</tr>
</tbody>
</table>

b Movement in allowance for bad debts

<table>
<thead>
<tr>
<th></th>
<th>Group 2015 £'000</th>
<th>Group 2014 £'000</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 January</td>
<td>167</td>
<td>101</td>
</tr>
<tr>
<td>Additions</td>
<td>394</td>
<td>654</td>
</tr>
<tr>
<td>Write off</td>
<td>(349)</td>
<td>(588)</td>
</tr>
<tr>
<td>31 December</td>
<td>212</td>
<td>167</td>
</tr>
</tbody>
</table>
## 11 Creditors

### a Amounts falling due within one year

<table>
<thead>
<tr>
<th>Note</th>
<th>Group 2015</th>
<th>Group 2014</th>
<th>Charity 2015</th>
<th>Charity 2014</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>£'000</td>
<td>£'000</td>
<td>£'000</td>
<td>£'000</td>
</tr>
<tr>
<td>Trade creditors</td>
<td>476</td>
<td>305</td>
<td>19</td>
<td>-</td>
</tr>
<tr>
<td>Retirement benefits</td>
<td>-</td>
<td>194</td>
<td>-</td>
<td>15</td>
</tr>
<tr>
<td>Taxation and social security</td>
<td>63</td>
<td>65</td>
<td>1</td>
<td>8</td>
</tr>
<tr>
<td>Accruals</td>
<td>878</td>
<td>752</td>
<td>15</td>
<td>15</td>
</tr>
<tr>
<td>Deferred income 11 b</td>
<td>61</td>
<td>92</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Holiday pay accrual</td>
<td>-</td>
<td>-</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td></td>
<td><strong>1,519</strong></td>
<td><strong>1,408</strong></td>
<td><strong>36</strong></td>
<td><strong>38</strong></td>
</tr>
</tbody>
</table>

### b Deferred income

<table>
<thead>
<tr>
<th></th>
<th>Group 2015</th>
<th>Group 2014</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>£'000</td>
<td>£'000</td>
</tr>
<tr>
<td>1 January</td>
<td>92</td>
<td>46</td>
</tr>
<tr>
<td>Deferred income recognised</td>
<td>119</td>
<td>184</td>
</tr>
<tr>
<td>Deferred income released</td>
<td>(153)</td>
<td>(152)</td>
</tr>
<tr>
<td>Exchange differences</td>
<td>3</td>
<td>14</td>
</tr>
<tr>
<td>31 December</td>
<td><strong>61</strong></td>
<td><strong>92</strong></td>
</tr>
</tbody>
</table>

### c Amounts falling due after more than one year

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>£'000</td>
<td>£'000</td>
<td>£'000</td>
<td>£'000</td>
</tr>
<tr>
<td>1 January</td>
<td>2,934</td>
<td>3,048</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Additions</td>
<td>455</td>
<td>304</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Exchange differences</td>
<td>126</td>
<td>(41)</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Payments</td>
<td>(62)</td>
<td>(377)</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>31 December</td>
<td><strong>3,453</strong></td>
<td><strong>2,934</strong></td>
<td>-</td>
<td>-</td>
</tr>
</tbody>
</table>

Accrued retirement benefits mainly represents amounts payable under Israeli law when staff leave SJEHG 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.
12 Unrestricted Income Funds

<table>
<thead>
<tr>
<th></th>
<th>1 January 2015</th>
<th>Incoming Resources</th>
<th>Resources Expended</th>
<th>Transfers</th>
<th>Gains &amp; Losses</th>
<th>31 December 2015</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>£'000</td>
<td>£'000</td>
<td>£'000</td>
<td>£'000</td>
<td>£'000</td>
<td>£'000</td>
</tr>
<tr>
<td><strong>Group</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>General reserves</td>
<td>2,448</td>
<td>5,101</td>
<td>(5,091)</td>
<td>-</td>
<td>(18)</td>
<td>2,440</td>
</tr>
<tr>
<td>Designated funds: Tangible fixed assets</td>
<td>3,371</td>
<td>428</td>
<td>(676)</td>
<td>927</td>
<td>182</td>
<td>4,232</td>
</tr>
<tr>
<td>Revaluation reserve</td>
<td>135</td>
<td></td>
<td></td>
<td>11</td>
<td></td>
<td>146</td>
</tr>
<tr>
<td>Total unrestricted funds</td>
<td>5,954</td>
<td>5,529</td>
<td>(5,767)</td>
<td>927</td>
<td>175</td>
<td>6,818</td>
</tr>
<tr>
<td><strong>Charity</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>General reserves</td>
<td>3,949</td>
<td>257</td>
<td>(515)</td>
<td>-</td>
<td>(8)</td>
<td>3,683</td>
</tr>
<tr>
<td>Designated funds: Tangible fixed assets</td>
<td>5</td>
<td>7</td>
<td>(6)</td>
<td>-</td>
<td></td>
<td>6</td>
</tr>
<tr>
<td>Revaluation reserve</td>
<td>135</td>
<td></td>
<td></td>
<td>11</td>
<td></td>
<td>146</td>
</tr>
<tr>
<td>Total unrestricted funds</td>
<td>4,089</td>
<td>264</td>
<td>(521)</td>
<td>-</td>
<td>3</td>
<td>3,835</td>
</tr>
</tbody>
</table>

Transfer from restricted funds represents amounts released from restricted funds for the purchase of tangible assets.

13 Restricted Income Funds

<table>
<thead>
<tr>
<th></th>
<th>1 January 2015</th>
<th>Incoming Resources</th>
<th>Charitable Activities</th>
<th>Purchase of Tangible Assets</th>
<th>31 December 2015</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>£'000</td>
<td>£'000</td>
<td>£'000</td>
<td>£'000</td>
<td>£'000</td>
</tr>
<tr>
<td><strong>Charity</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Staff sponsorship</td>
<td>211</td>
<td>935</td>
<td>(961)</td>
<td>-</td>
<td>185</td>
</tr>
<tr>
<td>Outreach</td>
<td>90</td>
<td>2</td>
<td>(92)</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>West Bank and Gaza Facilities</td>
<td>10</td>
<td>169</td>
<td>(171)</td>
<td>-</td>
<td>8</td>
</tr>
<tr>
<td>Hebron capital project</td>
<td>200</td>
<td>227</td>
<td>-</td>
<td>(380)</td>
<td>47</td>
</tr>
<tr>
<td>Other capital projects</td>
<td>141</td>
<td>33</td>
<td>-</td>
<td>(59)</td>
<td>115</td>
</tr>
<tr>
<td>Patient relief</td>
<td>25</td>
<td>38</td>
<td>(60)</td>
<td>-</td>
<td>3</td>
</tr>
<tr>
<td>Income received from endowments</td>
<td>-</td>
<td>97</td>
<td>(97)</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Other projects</td>
<td>27</td>
<td>107</td>
<td>(77)</td>
<td>-</td>
<td>57</td>
</tr>
<tr>
<td>Others value less in each case than £25,000</td>
<td>11</td>
<td>21</td>
<td>(15)</td>
<td>-</td>
<td>17</td>
</tr>
<tr>
<td><strong>Total Charity</strong></td>
<td>715</td>
<td>1,629</td>
<td>(1,473)</td>
<td>(439)</td>
<td>432</td>
</tr>
<tr>
<td>Capital projects</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other projects</td>
<td>981</td>
<td>386</td>
<td>-</td>
<td>(488)</td>
<td>879</td>
</tr>
<tr>
<td>Others value less in each case than £25,000</td>
<td>521</td>
<td>880</td>
<td>(866)</td>
<td>-</td>
<td>535</td>
</tr>
<tr>
<td><strong>Total Group</strong></td>
<td>2,231</td>
<td>2,992</td>
<td>(2,432)</td>
<td>(927)</td>
<td>1,864</td>
</tr>
</tbody>
</table>

Charity
- Staff sponsorship represents funds received to cover or contribute to staff costs of 47 hospital staff.
- Outreach funds cover the running costs of two outreach units.
- West Bank and Gaza Facilities Fund contribute to cover the operating costs of Gaza, Hebron and Anabta Clinic.
- Capital projects funds represent funds received from various UK Trusts and Middle East donors to purchase medical equipment and for the construction of the two new daycare hospitals in Gaza and Hebron.
- 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.

Group
- Capital projects funds represent funds received from various donors to purchase a vehicle for the outreach project, new Health Management Information System, medical equipment, and for the construction of the two new daycare hospitals in Gaza and Hebron.
- Other projects include donations received for the Diabetic retinopathy project, outreach programmes, patient relief, and Anabta Clinic.
## Endowment Funds

### Group & Charity

<table>
<thead>
<tr>
<th>Fund Name</th>
<th>1 January 2015</th>
<th>Investment Gains 2015</th>
<th>31 December 2015</th>
</tr>
</thead>
<tbody>
<tr>
<td>American Society of St John: Walsh Bequest</td>
<td>426</td>
<td>1</td>
<td>427</td>
</tr>
<tr>
<td>Bed Endowment</td>
<td>3,463</td>
<td>6</td>
<td>3,469</td>
</tr>
<tr>
<td>Frost Charitable Trust</td>
<td>466</td>
<td>-</td>
<td>466</td>
</tr>
<tr>
<td>Frost Nursing School</td>
<td>440</td>
<td>1</td>
<td>441</td>
</tr>
<tr>
<td>Mr. Owen Smith Endowment</td>
<td>94</td>
<td>-</td>
<td>94</td>
</tr>
<tr>
<td>The John Swire Foundation Endowment</td>
<td>1,019</td>
<td>2</td>
<td>1,021</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>5,908</strong></td>
<td><strong>10</strong></td>
<td><strong>5,918</strong></td>
</tr>
</tbody>
</table>

These funds represent:
- The American Society of St John: Walsh Bequest: The Bequest was made in 2000 in honour of the Rev. Canon Edward Walsh 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.

### Analysis by type of asset and liability

#### Group

<table>
<thead>
<tr>
<th>Asset/Liability</th>
<th>Unrestricted Funds 2015 £’000</th>
<th>Unrestricted Funds 2014 £’000</th>
<th>Restricted Funds 2015 £’000</th>
<th>Restricted Funds 2014 £’000</th>
<th>Endowment Funds 2015 £’000</th>
<th>Endowment Funds 2014 £’000</th>
<th>Total Funds 2015 £’000</th>
<th>Total Funds 2014 £’000</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tangible assets</td>
<td>4,232</td>
<td>3,371</td>
<td>-</td>
<td>-</td>
<td>4,232</td>
<td>3,371</td>
<td>4,232</td>
<td>3,371</td>
</tr>
<tr>
<td>Investments</td>
<td>4,319</td>
<td>4,250</td>
<td>-</td>
<td>-</td>
<td>5,918</td>
<td>5,908</td>
<td>10,237</td>
<td>10,158</td>
</tr>
<tr>
<td>Net current assets</td>
<td>1,720</td>
<td>1,267</td>
<td>1,864</td>
<td>2,231</td>
<td>-</td>
<td>-</td>
<td>3,584</td>
<td>3,498</td>
</tr>
<tr>
<td>Creditors: Amounts falling due</td>
<td></td>
<td></td>
<td>(3,453)</td>
<td>(2,934)</td>
<td>-</td>
<td>-</td>
<td>(3,453)</td>
<td>(2,934)</td>
</tr>
<tr>
<td>after more than one year</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>6,818</td>
<td>5,954</td>
<td>1,864</td>
<td>2,231</td>
<td>5,918</td>
<td>5,908</td>
<td>14,600</td>
<td>14,093</td>
</tr>
</tbody>
</table>

#### Charity

<table>
<thead>
<tr>
<th>Asset/Liability</th>
<th>Unrestricted Funds 2015 £’000</th>
<th>Unrestricted Funds 2014 £’000</th>
<th>Restricted Funds 2015 £’000</th>
<th>Restricted Funds 2014 £’000</th>
<th>Endowment Funds 2015 £’000</th>
<th>Endowment Funds 2014 £’000</th>
<th>Total Funds 2015 £’000</th>
<th>Total Funds 2014 £’000</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tangible assets</td>
<td>6</td>
<td>5</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>6</td>
<td>5</td>
</tr>
<tr>
<td>Investments</td>
<td>2,991</td>
<td>3,208</td>
<td>-</td>
<td>-</td>
<td>5,918</td>
<td>5,908</td>
<td>8,909</td>
<td>9,116</td>
</tr>
<tr>
<td>Net current assets</td>
<td>838</td>
<td>876</td>
<td>432</td>
<td>715</td>
<td>-</td>
<td>-</td>
<td>1,270</td>
<td>1,591</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>3,835</td>
<td>4,089</td>
<td>432</td>
<td>715</td>
<td>5,918</td>
<td>5,908</td>
<td>10,185</td>
<td>10,712</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Item</th>
<th>2015 £’000</th>
<th>2014 £’000</th>
</tr>
</thead>
<tbody>
<tr>
<td>Net incoming resources</td>
<td>322</td>
<td>1,596</td>
</tr>
<tr>
<td>Investment income</td>
<td>(147)</td>
<td>(123)</td>
</tr>
<tr>
<td>Loss on disposal of tangible fixed assets</td>
<td>5</td>
<td>-</td>
</tr>
<tr>
<td>Foreign exchange differences</td>
<td>7</td>
<td>(6)</td>
</tr>
<tr>
<td>Depreciation</td>
<td>700</td>
<td>667</td>
</tr>
<tr>
<td>Decrease / (Increase) in stocks</td>
<td>38</td>
<td>(248)</td>
</tr>
<tr>
<td>(Increase) / Decrease in debtors</td>
<td>(406)</td>
<td>223</td>
</tr>
<tr>
<td>Increase in creditors</td>
<td>630</td>
<td>17</td>
</tr>
<tr>
<td><strong>Net cash inflow from operating activities</strong></td>
<td><strong>1,149</strong></td>
<td><strong>2,126</strong></td>
</tr>
</tbody>
</table>
17 Trustees’ Remuneration

The trustees receive no remuneration.
Reimbursement of trustees’ expenses for travel, accommodation and flights for 10 trustees (2014, 13) during the year amounted to £24,149 (2014, £22,671).
Charity Trustee Indemnity insurance is provided at a cost of £6,440 (2014, £6,413) to cover the charity, trustees and officers against potential claims and losses.

18 Related Party Transactions

The Charity is a wholly owned subsidiary of The Most Venerable Order of the Hospital of St John of Jerusalem (Charity number 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 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 a 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.

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

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

<table>
<thead>
<tr>
<th>Priory</th>
<th>2015</th>
<th>2014</th>
</tr>
</thead>
<tbody>
<tr>
<td>USA</td>
<td>1318</td>
<td>623</td>
</tr>
<tr>
<td>England and the Islands</td>
<td>468</td>
<td>481</td>
</tr>
<tr>
<td>Scotland</td>
<td>195</td>
<td>351</td>
</tr>
<tr>
<td>New Zealand</td>
<td>113</td>
<td>134</td>
</tr>
<tr>
<td>Australia</td>
<td>85</td>
<td>84</td>
</tr>
<tr>
<td>Canada</td>
<td>50</td>
<td>68</td>
</tr>
<tr>
<td>Wales</td>
<td>15</td>
<td>40</td>
</tr>
<tr>
<td>Singapore</td>
<td>2</td>
<td>2</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>2,246</strong></td>
<td><strong>1,783</strong></td>
</tr>
</tbody>
</table>

Donations by the Priory of the United States:

<table>
<thead>
<tr>
<th></th>
<th>2015</th>
<th>2014</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hospital - General Support</td>
<td>789</td>
<td>292</td>
</tr>
<tr>
<td>Hospital - Restricted</td>
<td>262</td>
<td>331</td>
</tr>
<tr>
<td>USAID / ASHA Hospital Restricted Grant</td>
<td>267</td>
<td>-</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>1,318</strong></td>
<td><strong>623</strong></td>
</tr>
</tbody>
</table>

During the year, the Charity reimbursed the Priory of England and the Islands and the Order of St John £13,836 (2014, £263) in respect of certain expenses incurred.
No amounts were outstanding with any related parties at 31 December 2015 or 2014.

19 Contractual & Designated Obligations

In 2014, a contract was signed to build a new day care hospital in Gaza. The total value of this contract is £920,000. The project continued in 2015, and the related liabilities are reflected in the financial statements and are capitalised accordingly. SJEHG will incur a further £315,000 related to this project in 2016.
In 2015, a contract was signed to complete the refurbishment of the new purchased property in Hebron. The total value of this contract is £404,000. The related liabilities are reflected in the financial statements and are capitalised accordingly. SJEHG will incur further £112,000 related to this project in 2016.
Professional Advisers & Administrative Information

London & Registered Office
4 Charterhouse Mews
London EC1M 6BB

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

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

Barclays Bank PLC
1 Churchill Place
London E14 5HP

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

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

Independent Auditors
PricewaterhouseCoopers LLP
1 Embankment Place
London WC2N 6RH

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

The Company 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).

St John of Jerusalem Eye Hospital Group was incorporated as a company limited by guarantee on 24 August 2010 under registration number 7355619. It is registered as a charity under the number 1139527.
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 2015.

The St John Priories from around the world have once again delivered much valued assistance to SJEHG. We thank the Priorities of Australia, Canada, England, New Zealand, Scotland, Singapore, the USA and Wales for their continuing support.

We are pleased to receive the support of our Patron Lord Vestey. We are grateful to the Guild, the 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 2015:
The Arab Fund for Economic and Social Development
Australian Representative Office, Ramallah
Bank of Palestine
The Ben May Charitable Trust
The Bernard Sunley Charitable Foundation
Bishops Waltham Charity Garden Fair
The Brillig Charitable Trust
The British Humane Association
The Cadogan Charity
Children of Peace
CHK Charities Limited
The Clothworkers’ Foundation
Consolidated Contractors Company
Dr Michael Dan
The Estate of Aubrey Desmond Donald
The Edwina Mountbatten & Leonora Children’s Foundation
The Eranda Foundation
The European Union
The Evan Cornish Foundation
Fred Hollows Foundation
The Estate of Joan Frieze
Caroline Gavin
The German Federal Ministry for Economic Cooperation and Development
Peter Goltra
Greendale Foundation
The Estate of Geoffrey Leslie Howe
The Hugh Symons Charitable Trust
Jerusalem Governorate
Johanniterhjälpen
The John Swire 1989 Charitable Trust
The Kadoorie Charitable Foundation
The Karl Kahane Foundation
Julietta Khoury
The Knights Templar
The Lavelle Fund for the Blind
The Linbury Trust
Timothy Mattar
The Maurice and Hilda Laing Charitable Trust
The MBC Heritage of Islam Trust
The Norton Rose Charitable Foundation
The OPEC Fund for International Development
Paltel
The Park House Charitable Trust
The Estate of Dorothy Peacock
The Perth Eye Clinic Foundation
The PF Charitable Trust
The Pilkington Charities Fund
Pictures on Walls
Qatar Committee
Stephen Roberts
Wael Sa’di
Salam Ya Seghar
The Sobell Foundation
St John New South Wales
The St John Commandery in Western Australia
Tamari Foundation
UNDP - Community Resilience and Development Programme
The United States Agency for International Development (USAID)
The Valentine Charitable Trust
Welfare Association
The Estate of Isla Williams
World Diabetes Foundation
World Health Organization
We would also like to thank the many diplomats who have taken the time to visit SJEHG this year. These included:

H.E. Donald Blome - United States Consul General, and his wife Debbie Blome
Ms. Martina Feenay - Head of Mission of Irish Representative Office to the PA
Mr. Hans Jacob Frydenlund - Head of the Representative Office of Norway to the PA
Ms. Sanna Kyllonen - Deputy Head of Mission, Representative Office of Finland to the PA
Mr. Vincenzo Racalbuto - Director of the Italian Development Cooperation Agency
H.E. Dominique Prince de La Rochefoucauld - The Grand Hospitaller for the Sovereign Military Order of Malta
Mr. Radek Rubes - Head of the Representative Office of the Czech Republic to the PA
Mr. Sergio Sierra Bernal - Head of the Representative Office of the Mexico to the PA
H.E. Justin Simpson - Representative for the Sovereign Military Order of Malta
Mr. Pedro Sousa e Abreu - Head of the Representative Office of the Portugal to the PA
Mr. Ralpf Tarraf - Head of the EU Delegation to the West Bank and Gaza Strip
Ms. Sandra Wijnberg - Deputy Head of Mission of the Office of the Quartet Representative
If you would like to support St John of Jerusalem Eye Hospital Group
or would like more information, please contact us:

4 Charterhouse Mews, London, EC1M 6BB, United Kingdom
+44 (0)20 7253 2582 info@stjohneyehospital.org

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

www.stjohneyehospital.org