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# 2015 UK ANNUAL REPORT & FINANCIAL STATEMENTS

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# WHO WE ARE AND WHAT WE DO

We are an international charity that transforms lives by working to eliminate avoidable blindness. There are 285 million people in the world who are blind or visually impaired, yet 80 per cent suffer unnecessarily from conditions that are preventable or treatable. Most of these people live in developing countries where access to eye care is scarce.

Through long-term programmes and our Flying Eye Hospital, we:

- train doctors, nurses and the wider eye care team to save and restore sight.
- strengthen and improve eye health systems by partnering with local hospitals, public health agencies, NGOs and governments.
- advocate to make fighting blindness a priority.

Providing access to quality eye care is one of the most effective and cost-efficient ways to reverse the cycle of poverty.

We have long-term programmes in more than 40 countries. In 2015 alone, we funded 3.7 million treatments and surgeries, and 21,469 training sessions.







## CHAIRMAN AND CEO'S WELCOME



Dear friends,

A very warm welcome to the 2015 Orbis UK annual report. Once again, we have been delighted and humbled by the efforts of our many supporters, partners and volunteers who have united with us to help eliminate avoidable visual impairment. Medical professionals, pharmaceutical companies, teachers, journalists, film-makers, partner organisations, governments, a member of the Royal family, even a cartoon character named Twinkle, have each played their part in transforming the lives of millions of people around the world this year.

Many of those people live in Ethiopia, where severe drought made conditions particularly difficult, yet we still managed to provide nearly 3.5 million treatments for trachoma, a widespread condition which causes blindness. This year we joined other NGOs and governments to celebrate the delivery of the 500 millionth dose of Zithromax, the antibiotic donated by Pfizer that treats trachoma. Having been engaged in the battle with this excruciating disease for more than 15 years, this represented a monumental landmark both for Orbis and the wider international healthcare community; the publicity it generated also raised vital awareness across the whole continent.

Stamping out conditions like trachoma in Ethiopia is a team effort, and we were pleased to be recognised in the Third Sector Awards for our partnership with Amref Health Africa in the South Omo region. We were also able to extend our trachoma work to new parts of the country this year, thanks to our partnership with Sightsavers, funded by the Department for International Development (DFID) through their SAFE programme. DFID provided the impetus for our mighty 'Vision for Zambia' campaign too, by promising to double every donation we received. Our total donations for this 2015/2016 appeal came to a wonderful £925k, which thanks to Gift Aid and the UK Aid Match scheme will turn into nearly £2m. This will enable us to prevent blindness in even more children, particularly those in isolated rural areas who have limited access to quality eye care.

Such life-transforming sums are the result of many individual acts of kindness. This year, our generous supporters enabled us to commit more money to vital eye care programmes than ever before, bringing us closer to our vision of a world where no-one is needlessly blind. We hope you enjoy reading some of the inspirational stories behind our work in this year's annual report.

On behalf of everyone who has had their life transformed by Orbis this year, thank you for your vital and continued support.

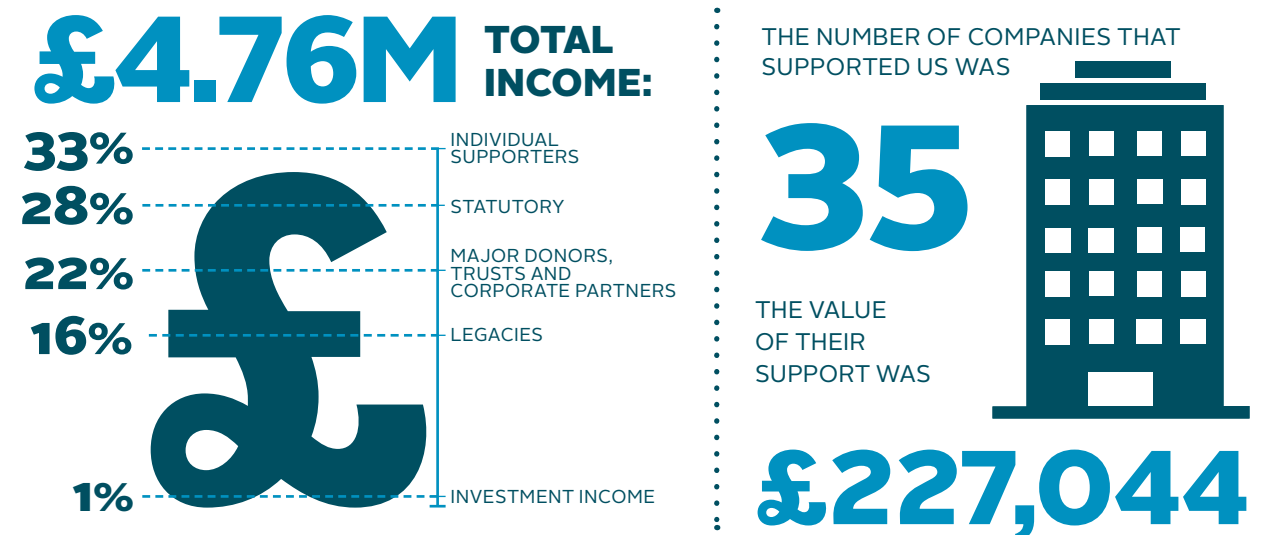
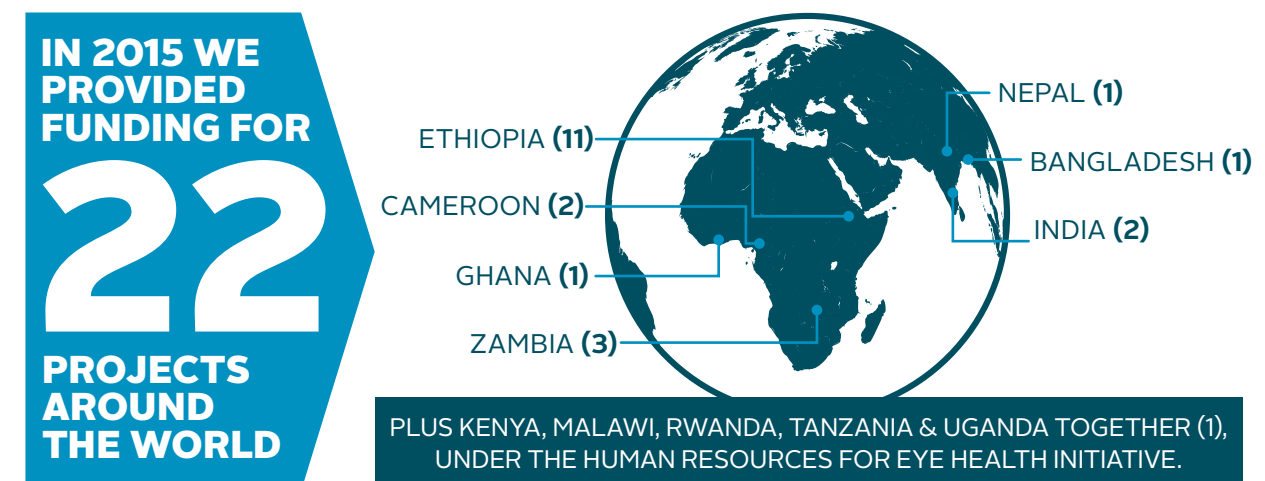
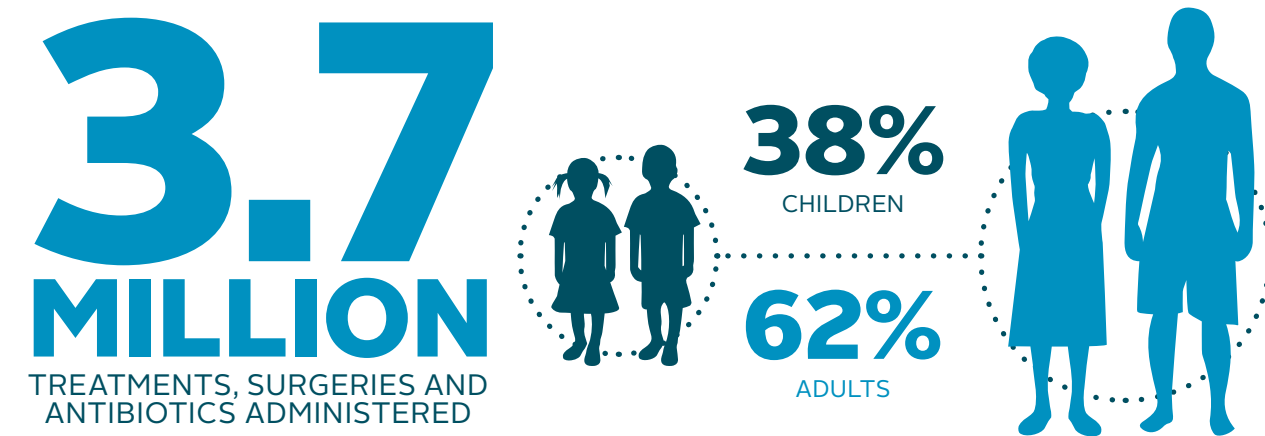
Peter Hickson, Chairman of Orbis UK

Rebecca Cronin, CEO Orbis UK, Regional Director Orbis EMEA

## A WARM WELCOME TO OUR 2015 REPORT

# 2015 AT A GLANCE

## OUR IMPACT



# OUR WORK: COMPREHENSIVE EYE CARE

The effective delivery of sustainable, comprehensive eye care to communities in Africa is fundamental to our aims and objectives. This means making sure that even the most rural populations receive the best possible treatment, follow-up and education about eye health.

In 2015, working with our partners, our Comprehensive Eye Care projects facilitated 504,408 screenings and examinations, 3,490,447 treatments and 26,183 surgeries. This year, we continued our long-standing work in Ethiopia and made important progress in Cameroon and Zambia.

## ETHIOPIA

Sadly, Ethiopians represent more than a quarter of all adults in the world who have trichiasis, which is the advanced stage of trachoma, the biggest cause of infectious blindness worldwide. Trichiasis is a particularly painful and damaging condition, in which the eyelids turn inwards causing the lashes to scrape the eyeball. It often leads to permanent blindness, devastating the lives of those who have it.

In 2014 we were proud to be selected to receive funding from the Department for International Development (DFID) as national coordinator of a project to eliminate trachoma in four regions of Ethiopia by 2020. This year we continued this work throughout the country while negotiating the considerable challenges presented by severe drought, which sometimes caused our partners' efforts to be temporarily diverted.

In these circumstances we were especially pleased to have administered antibiotics to 91 per cent of the populations in Gamo Gofa and the Segen Zone, exceeding World Health Organisation (WHO) targets. Funding from DFID also helped us reach people with trachoma in Hadiya Zone and Yem Special Woreda. To make sure the message got out to those most in need, we enlisted local town-criers to spread the news; by December we had met our annual target, performing more than 3,500 surgeries.

In November we joined with other NGOs and governments to celebrate the delivery of the 500 millionth dose of Zithromax – a momentous landmark that generated valuable publicity throughout Ethiopia and beyond. Zithromax, generously donated by Pfizer, is the principal drug used in the fight against

trachoma; it is one of the antibiotics that helps us deliver the WHO's 'SAFE' strategy (Surgery, Antibiotics, Facial cleanliness, Environmental change), which we helped to pioneer in Ethiopia more than 15 years ago.

In 2015, we implemented SAFE in the South Omo Zone as part of an award-nominated partnership with Amref Health Africa. Together, we gave nearly 6,000 people access to safe water and sanitation, conducted 769 sight-saving surgeries, and trained 220 health volunteers, teachers and other local residents in sanitation and hygiene awareness.

Of course, SAFE also involves equipping local nurses with the skills required to deal with trichiasis once it has developed. In West Gurage, we carried out new WHO 'Head Start' training with 14 nurses, which involved practising surgery on artificial models before moving on to live patients under close supervision.

After qualifying, eight of them filled vacant posts at existing Primary Eye Care Units (PECUs) and the remaining six established PECUs at their respective Health Centres. They are all now engaged in helping to clear a backlog of more than 700,000 people in need, across four regions.

Orbis-trained nurses were also engaged in the treatment of cataract and refractive error in Ethiopia in 2015; here it is also vital to educate local teachers about eye health. In Wolaita and Kembata zones, we provided refresher training in eye screening for 1,332 teachers, which led to 906 children being successfully diagnosed and provided with glasses. We also established a new training programme for teachers across three regions in Ethiopia, and we look forward to monitoring its success in 2016.





TRUSTEES' REPORT

**ZAMBIA**

In Zambia, we provide comprehensive eye care to communities in the North Western Province. This year we were delighted to exceed all our targets for clinical outputs in the region, including an impressive 177,595 screenings and examinations.

This was possible, in part, due to the screening of a documentary, *Mbunio Mumeso (Clouds in my Eyes)*, which was produced following research we had commissioned into the barriers patients face when seeking treatment. It follows a group of elderly Zambians, who overcome their fears about the risks they mistakenly associate with surgery in order to receive life-transforming cataract operations.

We launched the film as part of the hugely successful World Sight Day festivities in Kasempa District on 8th October, which attracted hundreds of members of the local community as well as government officials, partners and funders. The film's message – to seek immediate advice if you experience any change to your vision – was supported on the day by on-site screenings and distribution of antibiotics.

In fact, over the course of the year, we were pleased to be able to facilitate the distribution of Zithromax to 96 per cent of the population in Kasempa. We also trained two new Ophthalmic Clinical Officers in Lusaka. Importantly, there was an uptake in the number of women accessing our services as well, though the figure is still below target; we will be rolling out screenings of our awareness films to reach even more women in 2016.

**CAMEROON**

In Cameroon this year we started to strengthen the ophthalmic skills of staff at the Yaounde Central Hospital (YCH), where we staged four highly successful Hospital Based Programmes. Supported by YCH and the Cameroon government, our volunteers were able to train eye care staff in skills ranging from cataract surgical techniques to biomedical engineering. The response was so good, we are delighted to report that plans are now being developed to conduct specialist training in Glaucoma in 2016. Many of the patients selected for treatment had been diagnosed as part of the free screening campaign we launched at YCH for World Sight Day on 8th October.

**CLOSE UP:  
ZERITU'S  
STORY**

Meet Zeritu, from Basketo in Ethiopia. You wouldn't know it to look at her now but for most of her life she has had trachoma; her eyes were red and itchy, producing a white discharge, and lumps under the eyelids made blinking excruciatingly painful. She developed the disease when she was just 8; by the time she married at 20, she had contracted trichiasis, the advanced stage of the condition, and was at risk of becoming completely blind.

**COUNTRY**  
Ethiopia

**PATIENT**  
Zeritu

**CONDITION**  
Advanced trachoma

**TREATMENT**  
Surgery

**RESULT**  
Vision protected



Then, one day in March 2015, Zeritu's husband heard about a nearby eye-screening event supported by Orbis. It was a four hour journey on foot to the Markala Health Centre, but well worth the wait; Zeritu and her husband received the news they hadn't dared dream of: a simple 20 minute operation could transform her life. Now, not only does she cook for herself and her family, she also works with her husband on their farm. Zeritu's 24 year battle with increasing pain and growing isolation have happily come to an end.

CASE STUDY

Sadly, the shame Zeritu felt about her eyes' discharge, together with the pain caused by blinking and bright sunlight, combined to keep her at home, isolated from her community. Gradually she became more and more reliant on her husband and three children to help her perform even the most basic of tasks. All she wanted was to be pain free and able to look after her family; but, severely limited by trichiasis, she couldn't even feed herself.



# OUR WORK: CHILDHOOD BLINDNESS

Sadly, in developing countries, more than 90 per cent of children who are blind do not go to school; not only can this lead to social and emotional isolation for the child, it also severely hampers the family's future prospects and those of the wider community.

In 2015, we continued our commitment to the prevention and treatment of childhood blindness, supporting the screening of 338,772 children, 170,611 treatments and 6,194 surgeries.

## AFRICA

In 2014, we outlined plans to expand our Comprehensive Child Eye Health Programme in Copperbelt Province, Zambia, due to its high population of children and chronic shortage of ophthalmologists and paediatric specialists. This year, it was exciting to watch the project gain momentum as it approaches its second phase, which will focus on community outreach, training and education.

More exciting news came from DFID, who agreed to match every pound of the £500,000 we aimed to raise for this expansion from 2016. In fact, our generous supporters managed to raise £924,831 with our Vision for Zambia appeal, which DFID doubled to make a total of £1,936,836, once gift aid was applied. With this commitment we will be able to transform the lives of 70,000 more children across Copperbelt.

The staff at Kitwe Hospital in Zambia have now been undergoing Orbis training for six years. Thanks to their dedication, this year they were able to become trainers themselves, helping their friends from Ghana, who travelled from our partner, the Komfo Anokye Teaching Hospital (KATH) in Kumasi to learn about their methods. It was especially pleasing to see countries help each other in this way – a first for Orbis and an exciting development in our growing paediatric programme in Ghana. We're proud to

report that the Ghanaian Ministry of Health has recognised this work by committing to increase the overall number of people trained in eye health in future.

In Hawassa, Southern Ethiopia, thanks to our initiatives to attract more patients, our partner Hawassa University Teaching Hospital was able to provide almost 500 operations for children, beating our target by more than 200 per cent. Our partner also exceeded expectations for all adult and child medical and optical treatments, delivering a total of 13,019. We were delighted to experience high uptake of our services in Gondar, Northwest Ethiopia, as well, where our volunteer Paediatric Ophthalmologist and Orthoptist provided hands-on training and lectures during a successful Hospital Based Programme in November.

In Cameroon, the situation was more challenging, due to persistent construction delays on our new Paediatric Eye Care Training Centre at the Magrabi ICO Cameroon Eye Institute; however, we continued to invest in the training of Paediatric Ophthalmologist Dr Ted Grimbert. In 2015 he travelled to Kenya and India to advance his specialist paediatric skills through hands-on instruction, while successfully completing his training in oculoplastics. We look forward to the facility's completion in 2016.



## IN 2015 WE SUPPORTED:

**338,772**  
SCREENINGS

**170,611**  
TREATMENTS

**6,194**  
SURGERIES



TRUSTEES' REPORT

ASIA

Once again, we were pleased to beat our targets on service uptake in Asia, resulting in thousands more treatments for adults and children than we could have hoped for.

In Nepal, we were able to screen or examine more than 180,000 children, despite challenges presented by continued strikes and the major earthquake in April. Wherever possible, we rearranged our planned activities, which enabled us to meet most of our clinical and training targets.

We also continued to develop the capacity of the De'ep Eye Care Foundation in the Northern Region of Bangladesh. By the end of the year, in partnership with the Chars Livelihood Programme and BRAC, we were able to deliver more than 45,000 child screenings and examinations.

In November, we were delighted to launch our fifth Vision Centre at Bhojpur in India. This completes the referral network for the CL Gupta Eye Institute in Western Uttar Pradesh, which provides access to eye care for people in need in the local area.

However, the excellent leadership skills of the Institute's Vice Chairman, Dr Ashi Khurana, were somewhat overshadowed by the work of key opinion-formers Chacha Chaudhary, Billoo, Pinki and Twinkle. This enlightened group of characters stole the show on World Sight Day, appearing in a comic about the importance of eye health and safety. Fortunately, like the children they educate and entertain, Dr Khurana sees the funny side of this essential collaboration.



CLOSE UP:  
DAVID'S  
STORY

COUNTRY  
Zambia

PATIENT  
David, 10 years old

CONDITION  
Cataracts

TREATMENT  
Surgery

RESULT  
Vision restored



Children can be cruel. When David's cataracts began to prevent him from joining in at school, some of his friends started calling him 'cameraman' and stopped playing with him. David was just 10 years old.

In fact, David had had cataracts since he was four months old. His mum, Maria, desperately wanted to help him; she would cry at the sight of his friends playing outside while David stayed at home. She decided to take him to his grandmother, who made cuts near his eyes and put herbs on the wounds. This is the traditional healing method in the Copperbelt region of Zambia.

Unfortunately his eyesight just got worse and worse, and soon David couldn't play football anymore, or watch his favourite team, Chelsea, on the TV. His teacher at school said she could no longer read his writing either.

Then, one day, Maria heard about a child eye screening programme at the local clinic; she woke up at 5am the next morning to take David. They diagnosed cataracts, and within a week David had an operation on both eyes at the Orbis-supported Kitwe Eye Annexe.

Although David now needs glasses he is able to join in with his friends at school again. When David grows up he wants to be a doctor, just like the one who treated him at the hospital. That is, of course, unless he gets signed up to play for Chelsea first.

David is the star of *The Clouds Have Cleared*, one of the films we made in Zambia in 2015, which will be screened at community events to raise awareness about the importance of timely treatment for eye conditions.





# OUR WORK: SPECIALIST TRAINING

It goes without saying that our work is guided by the very best standards of clinical excellence. When working in developing countries, this means facilitating the transfer of skills and knowledge from our expert medical volunteers to local healthcare professionals. We do this on board our unique Flying Eye Hospital and in a series of Hospital Based Programmes in local facilities.

Every year, our remarkable volunteer ophthalmologists, anaesthetists, nurses, biomedical engineers and orthoptists train local eye health workers in countries with high rates of avoidable blindness. In 2015, 11 volunteers from the UK and Ireland gave up their free time and holidays to come and work with us, joining their global counterparts to train hundreds of eye care workers.

In 2015 we conducted 33 Hospital Based Programmes across 15 countries in four continents. As always, we undertook training in a range of sub-specialties tailored to local requirements, including biomedicine, small incision cataract surgery, anaesthesia, glaucoma, and paediatrics. It was particularly satisfying to see the success of two programmes with a new partner, in Kumasi, Ghana, where our hands-on training has provided a solid foundation for much-needed improved eye care in the region.

## FLYING EYE HOSPITAL

It has been a year of transition for our remarkable Flying Eye Hospital, as we started the process of retiring our DC-10 aircraft and preparing for the launch of our new MD-10 in 2016. Nevertheless, despite gradually winding down the DC-10's activity we were still able to carry out three extremely successful programmes in Vietnam and Peru.

In Hue, Vietnam, London-based nurse Cherelyn Victor was joined by nurses from the US and South Africa, who all volunteered to impart their expert knowledge. As part of our drive to reduce cases of visual impairment in children,

**22 YEARS;  
299 SIGHT-SAVING JOURNEYS;  
TENS OF THOUSANDS TRAINED**



## TRUSTEES' REPORT

local nurses were trained in areas including paediatric strabismus (severe squint), glaucoma and oculoplastics (reconstruction of the eye socket and surrounding area). A similar programme took place in Hanoi, where trainee nurses, biomedical engineers and anaesthetists all benefited from hands-on instruction in treating children with avoidable eye conditions.

In Trujillo, Peru, the Flying Eye Hospital's four-week training programme has become a regular event. 2015 marked our fifth visit as we continued our work to prevent blindness from eye conditions related to diabetes, which is a growing international concern. With help from our long-standing partnerships with the Instituto Regional de Oftalmología and Alcon, we were able to provide tailored training to local ophthalmologists, nurses, anaesthetists and biomedical engineers, as well as other allied eye care professionals.

We will be sad to say goodbye to our DC-10; it has been at the forefront of our fight to eliminate avoidable blindness for 22 years, conducting 299 sight-saving journeys and training tens of thousands of eye care professionals. It has served us and the wider eye care community well.

The development of the MD-10 next generation Flying Eye Hospital has been one of the most extraordinary stories in medical and aviation history. Since its donation by FedEx in 2009, hundreds of people have come together to combine avionics, hospital engineering and clinical expertise to create a genuinely unique innovation.

The very latest hospital equipment and technology is now in place across eight 'modules', which include a laser treatment room, operating theatre, 46-seat classroom and audio-visual suite. Just two pilots, rather than three, will command an upgraded digital cockpit, and benefit from increased fuel capacity and superb levels of operating efficiency.

Following years of hard work, the MD-10 will be ready to embark on its inaugural programmes, in China and Indonesia, in 2016. We can't wait.



## CLOSE UP: HUMAN RESOURCES FOR EYE HEALTH

One of the greatest challenges in the fight to reduce avoidable blindness is the global shortage of trained eye care professionals; and what staff there are tend to be based in urban areas. Addressing this issue of human resources is vital if a health system is to function effectively, which is why, this year, we finalised plans for our comprehensive Human Resources for Eye Health (HReH) programme. It will be implemented over the next five years, across East Africa, in partnership with the College of Ophthalmology of Eastern, Central and Southern Africa (COECSA), who will provide the curriculum for our training centres. HReH is supported by the International Agency for the Prevention of Blindness (IAPB).

Our first programme specifically designed to address HReH began in Lusaka, Zambia, in 2014, where we have been training teachers at the University Teaching Hospital. Over the next five years we will be strengthening teaching and training centres in Kenya, Uganda, Tanzania, Malawi and Rwanda, focusing on glaucoma, cataract, paediatric ophthalmology and medical retina. The Flying Eye Hospital will travel to these countries to help deliver this training; it will also raise awareness and advocate for the need for more eye care staff.

In preparation for the start of the programme in 2016, we have secured valuable grants that will benefit all of the countries involved by funding training to strengthen ophthalmic leadership, wet labs in Malawi and Uganda, and paediatric ophthalmology training in Tanzania.





## OUR WORK: ADVOCACY

In 2015, the United Nations (UN) put in place a new set of 'Global Goals for Sustainable Development', which emphasised the health aspect of poverty reduction. We welcomed this opportunity to make sure that our strategic plan corresponds closely to the global development agenda; one of our three main aims over the next five years calls for the prioritization of eye health within the following UN goals: poverty; equity; gender; education; and disability.

Our advocacy work has long been aligned with UN objectives; for example, encouraging greater investment for trachoma elimination through our work with the Federal Ministry of Health in Ethiopia, or via community engagement initiatives such as radio broadcasts and film screenings in sub-Saharan Africa. In 2015, we were particularly pleased to secure the support of the governments in Cameroon and Qatar.

We also joined with representatives from Orbis offices around the world to ensure that, as well as being in line with UN aims, our advocacy approach is both unified globally and respectful of the particular needs of the different countries in which we work. Next year, we look forward to planning and implementing the Orbis UK part of this new strategy.

### CAMEROON

On 8th October, World Sight Day, Cameroon's Minister for Public Health chaired a meeting which saw the launch of the Strategic National Eye Care Plan, part of the country's commitment to Human Resources for Eye Health (HReH), which we have been instrumental in developing. We now look forward to implementing the phased action plan, alongside other organisations, which will address the country's shortage of eye health experts and improve the skills of existing residents.

In November, our Cameroon representative, Hortance Manjo, attended a training and mentoring meeting, hosted by the International Agency for the Prevention of Blindness (IAPB), which brought together a variety of key stakeholders in eye health across the country. We look forward to working closely with the IAPB as we continue to ensure the effective development of strategic advocacy in Cameroon over the next 12 months.

## CLOSE UP: HRH THE COUNTESS OF WESSEX IN QATAR

In 2013, HRH Sophie, The Countess of Wessex-in her role as Ambassador for the International Agency for the Prevention of Blindness (IAPB) - visited Qatar with our Flying Eye Hospital. Her knowledge, passion and commitment to preventing blindness worldwide captured the hearts and minds of Qatari business people and dignitaries alike.

The following year, together with other IAPB partners, we submitted a comprehensive proposal to the Qatari government, outlining the opportunity they had to support our sight-saving work.

In October 2015, The Countess joined us on a follow-up visit, during which we cemented the relationships we had been developing with key organisations,



including Qatar Airways, Qatar Charity, Standard Chartered Bank Doha and the Oryx Rotana hotel.

It was also during this trip that the Qatar Development Fund (QDF) committed to provide a phenomenal 8 million US dollars over three years to support the initiative we had proposed; Qatar Creating Vision, will support the expansion of 19 paediatric eye care centres in India and Bangladesh, eye screening and glasses provision for school-children, and outreach work in local communities.

The visit culminated in a number of fundraising initiatives, launched on 8th October, World Sight Day, which included an exhibition of art by visually impaired children at Hamad International Airport, another one of our partner organisations. Money raised from this and other activities will go towards our joint campaign with Qatar Charity, 'These Hands', which aims to reduce childhood blindness in Bangladesh.

Back in the UK the following month, we were delighted to formalise our partnerships with QDF and the Qatar Creating Vision initiative at the Qatar Embassy in London, followed by a celebratory reception at Buckingham Palace.



# 2015 PROGRESS

WE SET OURSELVES FIVE KEY AIMS FOR 2015. THIS IS HOW WE DID.

1

## EXPAND OUR PROGRAMME REACH

We aim to treat and train more people, in more countries, than ever before. This means more investment in the consolidation and expansion of our vital, sustainable eye care programmes in Africa and Asia, and continuing to build trusted relationships with local and national governments and organisations.

### PROGRESS

- We committed more money to our programmes than ever before, across twelve countries, expanding existing programmes and developing new long-term projects in Ethiopia and Zambia.
- We facilitated the development of a new programme designed at increasing Human Resources for Eye Health across East Africa.
- Despite severe drought conditions in Ethiopia we still helped provide nearly 3.5 million treatments, and rearranged those delayed for 2016.

2

## GROW OUR INCOME

In order to treat and train more people, we will need to grow our income. Through investment in our fundraising programme, we will deepen our relationships with existing supporters, and generate new, diverse sources of income across Europe, Middle East and Africa.

### PROGRESS

- Overall, year-on-year income declined (due to a spike in 2014 caused by exceptional legacy revenue); however, we agreed several new partnerships that will provide long-term funding from 2016, such as those with DFID, Qatar Development Fund, Qatar Charity and ESCRS.
- We implemented a number of new fundraising initiatives including the 'Vision for Zambia' campaign (see more details on page 24), which saw donations doubled by the UK government. This inspired particularly generous contributions from many of our donors.
- We created the new post of Head of Partnerships Middle East to help develop and grow our fundraising and awareness in the region.
- We continued to build on excellent relationships with our donors, trusts and corporate partners. A survey in September 2015 to monitor our communication and engagement with supporters received a very positive response.

3

## RAISE OUR PROFILE

We will continue the rollout of our successful new brand and visual identity to reach new audiences in the UK and around the world. Optimising new and existing communications channels, including television advertising, publicity and social media, we will build the awareness and support required to transform even more lives.

### PROGRESS

- We increased our media presence by more than 130 per cent, achieving over 500 pieces of coverage across 15 countries, including key titles such as The Telegraph, The Daily and Sunday Express, and Readers Digest Magazine. Our 'Vision for Zambia' campaign also featured in 15 local newspapers and on 30 different local radio stations.
- More than 30,000 people visited our 'Vision for Zambia' website.
- We continued to trial advertising campaigns on TV and the London Underground to promote our work.

4

## PROVIDE EXCELLENT SERVICE

We will ensure our services meet the particular needs of local partners, staff and other collaborators, in each and every country we work in. Wherever we work, we will continue to make the Orbis name synonymous with quality, integrity and value for money.

### PROGRESS

- In conjunction with DFID, we carried out a full audit of our policies and procedures. This led to the development of more effective and efficient systems in areas including: Finance; Child Safeguarding; Fraud and Corruption; and Human Resources.
- Building on the success of our trachoma elimination programme with Sightsavers in Hadiya & Yem, Ethiopia, we developed plans to extend this work to a further 3 million people in the Sidama Zone in 2016.
- Our partnership with Amref Health Africa, which delivers the SAFE strategy in South Omo, Ethiopia, was a finalist in the 'Charity Partnerships' category of the Third Sector Excellence awards.



## DEVELOP AND IMPLEMENT GLOBAL INITIATIVES

In 2014, we developed the 2015-2019 five-year Orbis Global Strategy, based around our key programme pillars: medical and clinical excellence; and advocacy. Aligned to these pillars, we will now produce a regional strategy and plans, and commence new programmes.

### PROGRESS

- We successfully developed and agreed a three-year regional plan as part of the five-year Orbis Global Strategy.
- We participated in the first ever Cybersight training lecture, which focused on paediatric cataracts; one of our most experienced volunteers, Dr Dan Neely, taught staff at the Komfo Anokye Teaching Hospital (KATH) in Ghana, via a live link-up from his office in Indiana, USA.
- We finalised detailed plans for the launch of the new MD-10 Flying Eye Hospital, which will start work mid-2016.

## CLOSE UP: VISION FOR ZAMBIA

In just three months, between November 2015 and February 2016, we managed to generate an overwhelming £1.9m for our Vision for Zambia campaign. This was thanks to our wonderful supporters, who were doubly inspired: by the chance to transform thousands of lives in Zambia; and the opportunity for every donation made to be matched by DFID. Many got their friends and families involved too, making it our most successful campaign ever.

### INSPIRING SUPPORT

The cornerstone of our campaign was a bespoke website, [www.visionforzambia.org](http://www.visionforzambia.org), where people could 'add their name' to trigger the release of £2 of donated and matched funds. We raised awareness of the site with Facebook and Twitter campaigns, which featured an animation that explained the appeal. We also ran adverts on Facebook and Google, and put appeal 'inserts' in more than 600,000 publications. Meanwhile, our medical volunteer Ann-Marie Ablett was interviewed on 30 different local radio stations, while a letter of support, written by comedy writing legends

Lawrence Marks and Maurice Gran, led to widespread local media coverage.

We enlisted the vital help of new supporters through partnerships with 15 organisations, including B&M, Sock Shop and Missguided, who raised awareness and money via online advertising, e-newsletters and a whole host of fundraising activities. Equally important were our existing donors, who we included with campaign letters and an exclusive event.



Altogether, it was one of the most effective and rewarding campaigns we have ever delivered.

### THE RESULTS

**126,193,217**

OPPORTUNITIES FOR PEOPLE  
TO SEE OUR CAMPAIGN

**£924,831**

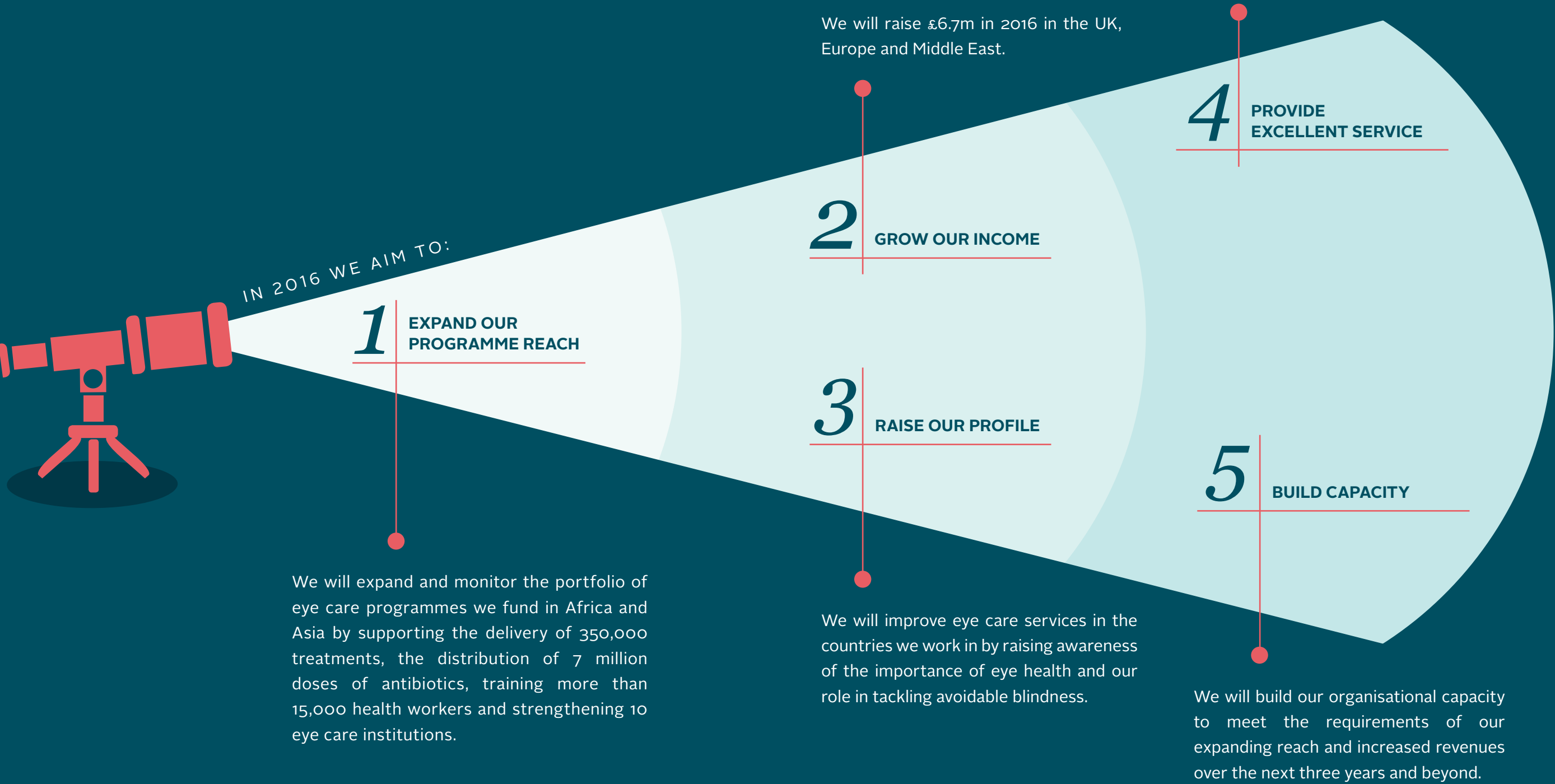
RAISED BY THE PUBLIC

**£1,936,836**

IN TOTAL, ONCE 'MATCHED' BY UK  
GOVERNMENT AND GIFT AID APPLIED

# LOOKING AHEAD TO 2016

This year we developed a three-year plan in line with the global organisational five-year strategy. Between 2016 and 2018 our cumulative goal is to support the delivery of 1,250,000 surgical and optical treatments and the distribution of 25 million doses of antibiotics to help protect people's vision. We will do this by training in excess of 20,000 health workers and strengthening 20 eye care institutions across Africa and Asia.





# THANK YOU

Our vital work is made possible through our partners, supporters and volunteers.

## GENEROUS INDIVIDUALS, CHARITABLE TRUSTS AND FOUNDATIONS (GIFTS OF £5,000 OR MORE)

The Aldama Foundation  
Gavin Anderson  
The Bliss Family Charity  
The Wilfred Harold Box Discretionary Trust  
Kit & Ro Braden  
John Carter  
The Carpenter Charitable Trust  
COFRA Foundation  
The Evan Cornish Foundation  
Covent Garden Group Foundation  
Peter Cunningham  
Pamela Dawswell  
The Edenbeg Charitable Trust  
Anthony Fincham  
The Donald Forrester Trust  
The Simon Gibson Charitable Trust  
Greendale Charitable Foundation  
Terence Hayward  
The Headley Trust  
Peter & Rosey Hickson  
Professor Johnnie Johnson  
The Beatrice Laing Trust  
Jean Long  
The Linbury Trust  
The Monatrea Charitable Trust  
The Moody Charitable Trust  
MPM Charitable Trust  
The Myristica Club  
Norman Newton  
OneLove Foundation  
Danny & Neera Passi

The Pinchbeck Charitable Trust  
Qatar Charity  
Rogers Stirk Harbour & Partners Charitable Foundation Ltd  
Mr Rowell  
Urs & Francesca Schwarzenbach  
Souter Charitable Trust  
The Tuttiett Family Charitable Trust  
Peter Williams  
Nigel & Anabelle Young  
The William Allen Young Charitable Trust

*Plus other generous high value donors who wished to remain anonymous*

## STATUTORY FUNDERS (GIFTS OF £5,000 OR MORE)

Department for International Development (DFID)  
Guernsey Overseas Aid Commission  
Jersey Overseas Aid Commission  
Qatar Development Fund

## GLOBAL CORPORATE PARTNERS

Alcon  
FedEx  
Jebsen  
L'Occitane en Provence and Fondation L'Occitane  
Omega  
Pfizer  
Ronald McDonald House Charities  
Standard Chartered Bank

## CORPORATE PARTNERS, EUROPE & MIDDLE EAST (GIFTS OVER £1,000)

ACS International Schools  
Airport Operators Association  
Altomed  
Clyde & Co  
Euromoney Institutional Investor PLC  
European Society of Cataract & Refractive Surgeons  
European Society of Retina Specialists  
F&H SF Limited  
Finter Bank Zurich  
Goldman Sachs  
Hamad International Airport  
Institute of Barristers Clerks  
IWISHUSUN  
Motion Picture Solutions  
Optica Gallery  
Oryx Rotana  
Qatar Airways  
Qatar British Business Forum  
Richfields  
Rotana Hotel Management Corporation PJSC  
ShareGift  
Skadden, Arps, Slate, Meagher & Flom LLP  
Southampton International Airport  
Standard Chartered Bank, Doha  
Zoobug

## VISION FOR ZAMBIA COMMUNICATIONS PARTNERS

ACS Egham  
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elinens  
Glenmuir  
L'Occitane en Provence  
Missguided  
Optometry Today  
Rhode Island Coffee  
Routes

Searcys  
Sock Shop  
Sotheby's Europe  
Southampton International Airport  
Tom Davies

## SPECIAL THANKS

HRH The Countess of Wessex  
The British Embassy in Qatar  
The Embassy of the State of Qatar in the UK  
Bruce Buck  
Paula Gleaden  
Lawrence Marks  
Maurice Gran

## UK & IRISH VOLUNTEERS 2015

Dr Lawrence Azavedo, Anaesthetist  
Mr Larry Benjamin, Ophthalmologist  
Mr Donal Brosnahan, Ophthalmologist  
Miss Fiona Dean, Ophthalmologist  
Mr Mike Eckstein, Ophthalmologist  
Dr Ian Fleming, Anaesthetist  
Mrs Jane Kempton, Optometrist  
Professor Janet Marsden, Nurse  
Mr Tony McAleer, Orthoptist  
Mrs Jayna Mistry, Orthoptist  
Ms Cherelyn Victor, Nurse

## OFFICE VOLUNTEERS 2015

Cherine Bajjali  
Polly Holt  
Kelsey Payne  
Hanan Said  
Nicola Swann

## UK AMBASSADORS 2015

Ann-Marie Ablett  
Brian Little  
Rob Pinchbeck  
Sunil Ruia  
Emad Turkman  
Henry Wyndham  
Toby Young

# UK BOARD OF TRUSTEES

## CHAIRMAN:

### PETER HICKSON MA FCA

Peter Hickson is chairman of Communisis PLC. He is also senior independent director of Coalfield Resources plc and has served leading roles in several high profile UK companies including Scottish Power, Powergen, Marconi Corporation and RAC plc.

Peter joined the Orbis UK board in 2008 and was appointed chairman in March 2015.

## TRUSTEES:

### SIR MICHAEL ARTHUR

Sir Michael Arthur was a career diplomat until 2010, with roles including three years as British Ambassador to Germany, four years as High Commissioner in India and time in Washington, Paris, Kinshasa and Brussels. His time in India deepened his interest in development issues.

Michael is currently President of Boeing, Europe. He retains other roles in the not-for-profit sector, and is a Non-Executive Director with one of the Tata companies.

Michael joined the Orbis UK board in 2011.

### LARRY BENJAMIN FRCS (ED), FRCOPHTH, DO PROGRAMME COMMITTEE CHAIR, UK

Larry Benjamin is consultant ophthalmologist at Stoke Mandeville Hospital, Buckinghamshire and has been an Orbis medical volunteer since 2004. With special interests in cataract and diabetic retinopathy management, he has also served as Chairman of the Education committee at the Royal College of Ophthalmologists as well as on the ophthalmic committee of the Royal Society of Medicine

and UKISCRS. He has published a number of scientific papers and two books as well as a number of book chapters.

Larry joined the Orbis UK board in 2008 and currently chairs the programme committee for Orbis UK and Orbis Africa.

### MICHAEL BOYD

#### AUDIT COMMITTEE CHAIR, UK

Michael Boyd holds a degree in Commerce from University College Dublin and is a Barrister at Law. He has also studied at the Harvard and London Business Schools. Most of his working life has been spent providing economic advice to developing countries.

Michael joined the Orbis UK board in 2010 and is a member of the Orbis Ireland and Orbis International boards.

### CHRISTOPHER (KIT) BRADEN

Kit Braden is a director of L'Occitane Limited. Since starting his business career with De La Rue in the 1960s, he has developed a number of privately held manufacturing businesses with factories in Europe, Asia and USA. Kit has supported Orbis projects, through the L'Occitane Foundation, for over 12 years.

Kit joined the Orbis UK board in 2013.

### BRUCE BUCK

Bruce Buck is a partner in the London office of international law firm Skadden, Arps, Slate, Meagher & Flom and responsible for a broad array of transactions in the corporate and financial areas. He has been practicing law in Europe since 1983.

Bruce joined the Orbis UK board in 1997.

### TONY COWLES

Tony Cowles has served in managerial positions for a number of airlines and travel services companies worldwide. He is also a Freeman of the City of London and a Liveryman with the Worshipful Company of Marketors.

Tony joined the Orbis UK board in 2002.

### MAURICE COX M.PHIL, FRCSI

Maurice Cox studied medicine at Trinity College, Ireland and Skeletal Biology at Cambridge University, working in local hospitals at both locations. In 1999, he joined the management consulting firm McKinsey and became a junior partner, working with the global health care practice. Maurice later cofounded The Well, a primary health care business in Dublin.

Maurice joined the Orbis UK board in 2004 and is chairman of Orbis Ireland.

### JAMES (JIM) D. FORBES

Jim Forbes is vice chairman of UBS Group, Americas. Prior to joining UBS, Jim was head of Global Principal Investments for Bank of America Merrill Lynch, managing the bank's equity interests in various high profile investments.

During Jim's 18 year tenure with Merrill Lynch he held leadership roles including Global Head of Healthcare Investment Banking and Head of Asia Pacific Investment Banking in Hong Kong.

Jim joined the Orbis UK board in 2014 and is also a member of the Orbis International board.

### MARY KILLEN

Mary Killen has been a journalist since 1984, her career began on Mark Boxer's Tatler and she has since written weekly columns for the Times, the Daily Telegraph, the Sunday Telegraph and the Daily Express. She is currently a freelance writer with a weekly advice column for the Spectator and The Lady Magazine.

Mary joined the Orbis UK board in 2001.

### DR GULLAPALLI 'NAG' RAO MD

Dr Rao returned to India in 1986 to establish L V Prasad Eye Institute, one of the world's leading eye research hospitals, after a successful career in the United States as an academic ophthalmologist. Dr Rao has specialised in diseases of the cornea, eye banking and corneal transplantation, community eye health, eye care policy and planning. Dr Rao is Past Chair and CEO of the International Agency for the Prevention of Blindness (IAPB) and currently a board member of the Brien Holden Vision Institute and Chair of its Foundation. He is also the President of Academia Ophthalmologica Internationalis and continues to be actively involved in global and national advocacy for eye care development.

Dr Rao joined the Orbis UK board in 2014.



# 2015 FINANCIAL STATEMENTS

## MELANIE RICHARDS

Melanie Richards is Vice Chairman and member of the UK Board for KPMG UK LLP and is a Partner in Corporate Finance Capital Advisory Services. Melanie has more than 30 years of banking experience including 15 years with NatWest and 3 years with Hambros' Fixed Income Group (which was acquired by RBC Dominion Securities in 1998), where she headed the private placement group. Melanie is a founding member of The 30% Club Steering Committee, a trustee of The Eve Appeal which funds research into the detection and prediction of gynaecological cancers and a governor of Eastbourne College. Melanie also joined the Harvard Women's Leadership Board in June 2014.

Melanie joined the Orbis UK board in 2010.

## CHRISTINE TOMKINS BSC(HONS), MBCHB(HONS), DO, FRCS, FRCOPHTH, MBA, FFFLM, FRCP

Christine Tomkins is the Chief Executive of the Medical Defence Union (MDU) and has been a registered medical practitioner for over 35 years. She has a proven record of sustained leadership and achievement. Dr Tomkins was a trustee of the Worshipful Company of Spectacle Makers' Charity until 2010, and she was chair from 2004 to 2009.

Christine joined the Orbis UK board in 2011.

## CHARLES VYVYAN

After Balliol College, Oxford Charles Vyvyan spent 35 years in the Army in a variety of operational, command, and staff appointments throughout the world. Since he retired in 2000 he has worked as a strategic adviser to a number of government and commercial organisations.

Charles joined the Orbis UK Board in 2008.

## ROBERT F WALTERS FRCS, FRCS(ED), FRCOPHTH.

Rob Walters is a consultant ophthalmologist, working in the National Health Service (NHS) for over 30 years and an Orbis medical volunteer since 1994. Rob has played key roles in numerous UK eye health organisations and authored three books on the causes and treatment of blindness.

Rob joined the Orbis UK board in June 2003 and was appointed chairman of the board from 2008- March 2015. He is on the board of Orbis International and is chairman of Orbis Africa.

## NIGEL YOUNG

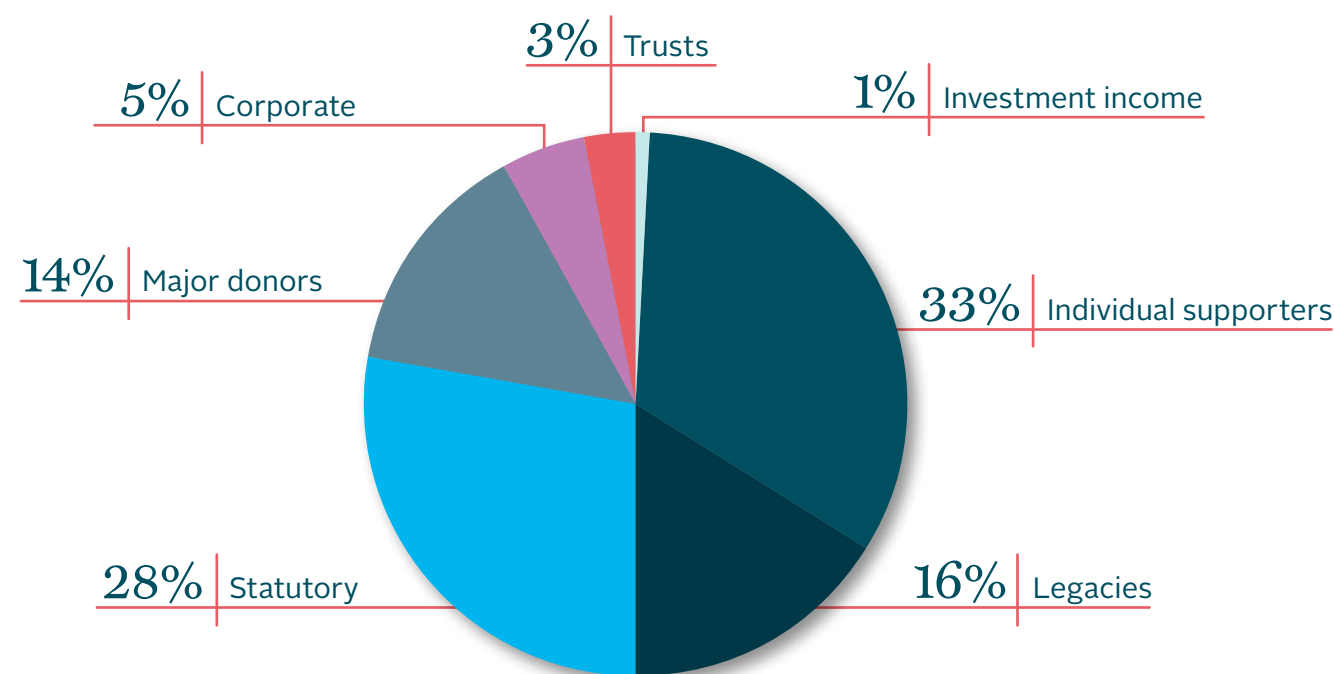
Nigel Young trained with KPMG in London and has been Finance Director of several UK public companies including Babcock International Group PLC and Morgan Advanced Materials Plc. In addition to a degree in economics from the University of Birmingham he also holds a masters degree in Environmental Science. Nigel is also currently a non executive director of Chemring Group PLC and P2i Limited.

Nigel joined the Orbis UK Board in 2012 and is also a member of the Orbis Africa Board.

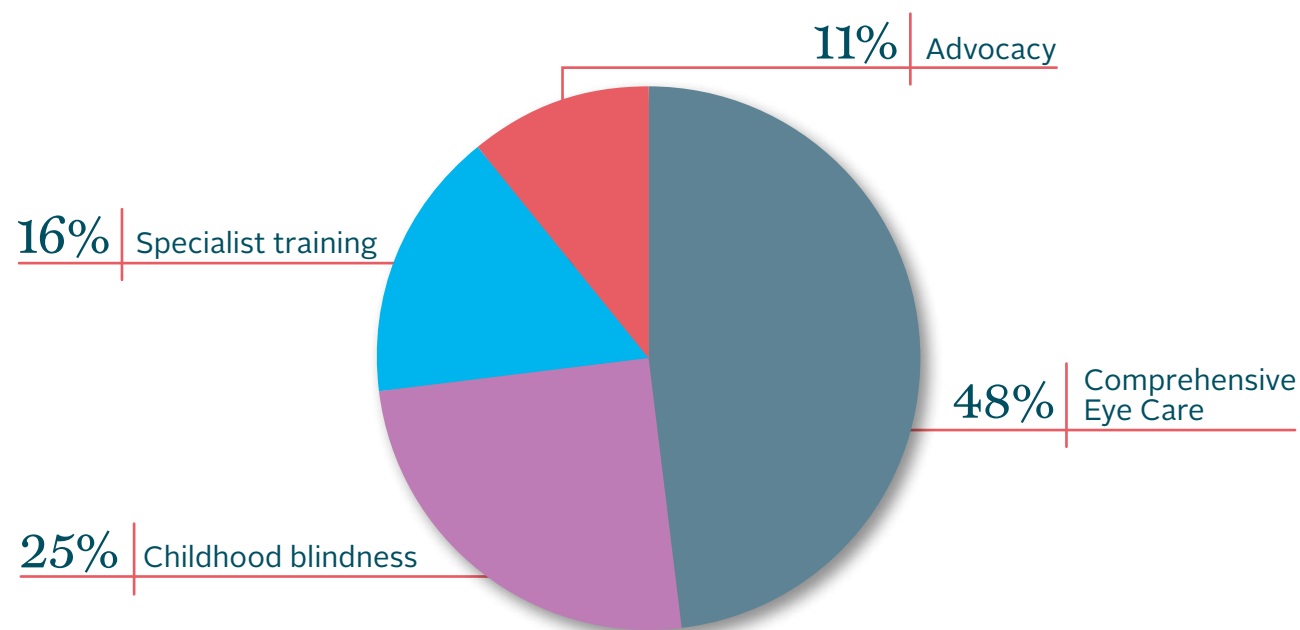


# 2015 FINANCIAL SUMMARY

## INCOME



## CHARITABLE ACTIVITIES



The cost of generating funds and governance was 25.01 per cent of our income in 2015.

# 2015 FINANCIAL STATEMENTS

## REFERENCE AND ADMINISTRATIVE DETAILS

Orbis Charitable Trust (Orbis UK, also known as Orbis EMEA) is a registered charity (No 1061352) and a company limited by guarantee (No 3303689). The Memorandum and Articles of Association provide that the liability of each member is limited to £1 in the event of the company being wound up. Orbis UK's address, the names of Trustees, the name of the Chief Executive and other senior management and information on Advisers are detailed on the last page of the financial statements.

Orbis UK is an affiliate of Project Orbis International, a nonprofit global development organisation established under the laws of the State of New York. This relationship and those with other affiliated organisations, Orbis Ireland and Orbis Africa are described in further detail in note 21 (Related Parties).

## OBJECTIVES AND PRINCIPAL ACTIVITIES OF THE CHARITY

Orbis UK's Memorandum of Association states that the objects for the public benefit for which it is established are:

- a) The relief of persons suffering from blindness and the prevention and cure of blindness by the provision of training, education and counselling
- b) The conduct of research into the causes and cure of blindness and sight deficiencies and the publication of the useful results of that research for the public benefit

The Trustees have had due regard to the Charity Commission's guidance on public benefit when considering Orbis UK's objectives and activities.

The overall aim of Orbis UK is to reduce the level of avoidable blindness in the countries and areas in the developing world where we work. Orbis UK provides funds to Orbis International and Orbis Africa to enable project implementation by grants funding to partners, who include government, local non-governmental and community based organisations. When selecting the geographical project area we consider the level of commitment from government to eye care in order that our work is integrated in a sustainable manner in the national or provincial health system. More information on what Orbis UK does, our work, Orbis UK's five key aims for 2015 and how we performed and Orbis UK's five key aims for 2016 can be found at the front of this report.

## FINANCIAL REVIEW AND RESULTS FOR THE YEAR

Income generated in the year ended 31 December 2015 was £4,759k. Income in 2014 was particularly high due to legacies received in the year. The results for 2015 are in line with Trustees' expectations at £983k lower than 2014's income.

In 2015, 35 per cent of our income was received from our loyal donors who either give on a monthly basis or respond to our appeals. We would like to emphasise how grateful Orbis UK is to those who choose to help with the prevention and treatment of blindness in the developing world through their extremely generous donations. 2015's statutory income was more than three times 2014's income due to the continued commitment from Jersey Overseas Aid and the first year of the Sightsavers funding for



the implementation of the DFID trachoma elimination programme in Ethiopia. Orbis UK also received the initial funding from the Qatar Development Fund for the Qatar Creating Vision programme. Corporate partners continued to support Orbis UK's work at consistently high levels and the number of trusts and foundations donating to Orbis UK increased in the year.

The cost of generating funds at 23.7 per cent of income (Dec 2014: 18.6 per cent) is well below the Trustees' target range of 25 – 30 per cent. In 2016 we will continue to promote our work to the general public.

In 2015 Orbis UK continued to expend more on programme activity than in any previous year and expenditure was up 3 per cent on 2014. Expenditure on charitable activities for the year was £4,619k (Dec 2014: £4,515k) as Orbis UK met its commitments to overseas programmes.

Governance costs were 1.2 per cent of income (Dec 2014: 1.1 per cent), the costs included the external audit fees and the costs of Trustees' meetings.

**STRUCTURE, GOVERNANCE AND MANAGEMENT**

Orbis UK is governed by its Memorandum and Articles of Association amended on 29 September 1997 and also on 22 December 2005. The Board of Trustees is responsible for the overall governance of the Charity, makes decisions on the strategic direction and policies of Orbis UK and delegates day to day management and implementation of these decisions to the Chief Executive.

Orbis UK adheres to Orbis International global policies relating to project selection and approval, all other policies are approved by the Trustees to comply with UK legal requirements and good business practice.

The Board of Trustees is authorised to appoint new Trustees as additions to the existing Board or to fill vacancies arising through resignation or death. The Trustees are members and directors for Companies Act purposes. Anthony Cowles, Maurice Cox, Peter Hickson and Charles Vyvyan have served in office for the longest period since their election and will retire at the AGM. The retirees may offer themselves for re-election.

Michael Boyd, James Forbes and Robert Walters also serve as Directors of Orbis International. Robert Walters and Nigel Young serve as Directors of Orbis Africa. Michael Boyd and Maurice Cox serve as Directors of Orbis Ireland.

On appointment to the Board, Trustees receive a Trustee handbook that includes the Memorandum and Articles of Association, Charity Commission and good governance information, Trustee job descriptions, terms of reference for sub-committees and programme information. At Board meetings presentations are made on relevant topics to keep Trustees up to date with developments within the charity sector generally and Orbis specifically.

The Board normally meets three times a year and delegates the exercise of certain powers in connection with the management and administration of the Charity as set out below. There are two sub committees reporting to the Board each with specific terms of reference and functions delegated by the Board.

**AUDIT COMMITTEE**

The Audit Committee is comprised of Trustees who are responsible for reviewing the management accounts throughout the year, monitoring Orbis UK's internal controls, recommending the appointment of the Auditors, reviewing the management letter submitted by the Auditors and risk assessment and management of the Charity.

**PROGRAMME COMMITTEE**

The Programme Committee comprises of Trustees, many of whom have an ophthalmic background, who are responsible for ensuring that Orbis UK maintains a high standard in programme selection, development, implementation and monitoring.

**CHIEF EXECUTIVE OFFICER AND SENIOR MANAGEMENT TEAM**

The Chief Executive Officer is responsible for the day-to-day management of Orbis UK's affairs and for implementing policies agreed by the Trustees. The Chief Executive Officer is supported by the Senior Management Team.

The Senior Management Team comprise the key management personnel of the charity in charge of directing, controlling and operating Orbis UK on a day to day basis.

**REMUNERATION OF KEY MANAGEMENT PERSONNEL**

The pay of all staff, including the senior management team, is reviewed annually and normally increased in accordance with the cost of living. A benchmarking exercise is carried out every three years for comparable roles within the public and not for profit sector in Central London, to set market pay levels for Orbis UK staff.

Two ex-gratia payments were made in the year, the total of which did not exceed £20k.

**RISK MANAGEMENT**

A formal risk management process is in place to assess business risks and implement risk management strategies. This has involved identifying the types of risks Orbis UK faces, prioritising them in terms of potential impact and likelihood of occurrence, and identifying means of mitigating the risks. As part of this process the Trustees have reviewed the adequacy of Orbis UK's current internal controls.

The principal risk that has been identified is ensuring that fundraising income continues at a level to fund the programmes approved by the Trustees. The commitment to funding sight saving projects with measurable outcomes and impacts enables Orbis UK to have confidence in relationships with our donors and reduces the likelihood of declining levels of income.

**RESERVES POLICY**

The Trustees have examined Orbis UK's requirements for free reserves in the light of the main risks to the organisation. The risks that have been identified are: having insufficient working capital to meet outstanding commitments; that further unbudgeted costs may arise; and that there may be an unexpected shortfall in income.

Having taken the risks into account, the Trustees consider that a reserves target of £1,300K +/-10 per cent is an appropriate level of general reserves for Orbis UK to hold. At 31 December 2015 the balance on general reserves was £1,008K which was £162K below the reserves target set by the Trustees. This was due to a receipt of a legacy in 2016 which had been accrued for in 2014 being £255K lower than expected.

In addition to the general reserve, at 31 December 2015 designated funds stood at £586k. The balance on designated reserves for Programme development and expansion has been released as it is no longer required. Originally this was to provide cash flow funding for new projects and for a new education role and consultants roles that will not be filled. The balance on Organisation development has been reduced reflecting the decision to stay in the current offices for a further two years. Further details are shown in Note 18 of the accounts, including the likely timing of expenditure.

GRANT MAKING POLICY

The decision to fund specific projects is approved by the Board of Trustees following selection along the criteria outlined above, recommendation by the Programme Committee and financial approval by the Audit Committee. The projects all fall within the Orbis International approved project portfolio. Funds are transferred to Orbis International and Orbis Africa on the basis of actual or forecast expenditure on the projects.

STATEMENT OF TRUSTEES' RESPONSIBILITIES

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

Company law requires the Trustees to prepare financial statements for each financial year. 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 affairs of the charitable company and of the incoming resources and application of resources, including the income and expenditure, of the charitable company 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/FRS 102;
- 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 Charity's transactions, disclose with reasonable accuracy at any time the financial position of the Charity and enable them to ensure that the financial statements comply with the Companies Act 2006 and the provisions of the Charity's constitution. The Trustees have applied the exemption available to small companies from preparing a strategic report. They are also responsible for safeguarding the assets of the Charity and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities.

In so far as each of the Trustees of Orbis UK at the date of approval of this report is aware, there is no relevant audit information of which Orbis UK's auditor is unaware. Each Trustee has taken all of the steps that he/she should have taken as a Trustee in order to make himself/herself aware of any relevant audit information and to establish that Orbis UK's auditor is aware of that information.

A large print version of this report is available via the Orbis website <http://gbr.orbis.org/pages/orbis-uk-financials>. This report has been prepared under the provisions of the Companies Act 2006 applicable to small companies.

APPROVAL

This report was approved by the Trustees on 8 July 2016 and signed on their behalf.

Trustee: 

INDEPENDENT AUDITOR'S REPORT TO THE MEMBERS OF ORBIS CHARITABLE TRUST

We have audited the financial statements of Orbis Charitable Trust for the year ended 31 December 2015 set out on pages 39 to 54.

The financial reporting framework that has been applied in their preparation is applicable law and United Kingdom Accounting Standards (United Kingdom Generally Accepted Accounting Practice).

This report is made solely to the charitable company's members, as a body, in accordance with Chapter 3 of Part 16 of the Companies Act 2006. Our audit work has been undertaken so that we might state to the charitable company's members those matters we are required to state to them in an auditor's report and for no other purpose. To the fullest extent permitted by law, we do not accept or assume responsibility to anyone other than the charitable company and the company's members as a body, for our audit work, for this report, or for the opinions we have formed.

RESPECTIVE RESPONSIBILITIES OF TRUSTEES AND AUDITOR

As explained more fully in the Statement of Trustees' Responsibilities, the Trustees (who are also the directors of the charitable company for the purpose of company law) 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). Those standards require us to comply with the Auditing Practices Board's Ethical Standards for Auditors.

SCOPE OF THE AUDIT OF THE FINANCIAL STATEMENTS

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 company's circumstances and have been consistently applied and adequately disclosed; the reasonableness of significant accounting estimates made by the directors; and the overall presentation of the financial statements.

We read all the financial and non-financial information in the Trustees' 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.

OPINION

In our opinion the financial statements:

- give a true and fair view of the state of the charitable company's affairs as at 31 December 2015 and of its incoming resources and application of resources, including its income and expenditure, 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.

Opinion on other matters prescribed by the Companies Act 2006.

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

MATTERS ON WHICH WE ARE REQUIRED TO REPORT BY EXCEPTION

We have nothing to report in respect of the following matters where the Companies Act 2006 requires us to report to you if, in our opinion:

- adequate accounting records have not been kept; or
- the financial statements are not in agreement with the accounting records and returns; or
- certain disclosures of trustees' remuneration specified by law are not made; or
- we have not received all the information and explanations we require for our audit; or
- the trustees were not entitled to take advantage of the small companies exemption in preparing the trustees' report.

Mike Hicks, Senior Statutory Auditor.  
For and on behalf of **Crowe Clark Whitehill LLP**  
Statutory Auditor, London





**STATEMENT OF FINANCIAL ACTIVITIES**  
(INCORPORATING AN INCOME AND EXPENDITURE ACCOUNT)  
**YEAR ENDED 31 DECEMBER 2015**

	Note	Unrestricted funds 2015 (£)	Restricted funds 2015 (£)	Total 2015 (£)	Total 2014 (£)
<b>INCOME FROM:</b>					
Donations and legacies	6	2,474,080	1,488,142	<b>3,962,222</b>	5,700,952
Charitable activities	8	-	770,409	<b>770,409</b>	-
Investments		26,325	-	<b>26,325</b>	40,629
<b>TOTAL INCOME</b>		<b>2,500,405</b>	<b>2,258,551</b>	<b>4,758,956</b>	<b>5,741,581</b>
<b>EXPENDITURE ON:</b>					
Raising funds		1,129,080	750	<b>1,129,830</b>	1,064,082
Charitable activities:					
• Comprehensive eye care		824,323	1,342,584	<b>2,166,907</b>	1,528,221
• Childhood blindness		795,447	345,664	<b>1,141,111</b>	1,192,822
• Specialist training		688,363	64,702	<b>753,065</b>	1,237,853
• Advocacy		497,796	30	<b>497,826</b>	491,015
• Governance		60,076	-	<b>60,076</b>	65,234
Total expenditure on charitable activities		2,866,005	1,752,980	<b>4,618,985</b>	4,515,145
<b>TOTAL EXPENDITURE</b>	11	<b>3,995,085</b>	<b>1,753,730</b>	<b>5,748,815</b>	<b>5,579,227</b>
<b>NET INCOME/EXPENDITURE</b>		(1,494,680)	504,821	<b>(989,859)</b>	162,354
Transfers between funds	18	166,915	(166,915)	-	-
<b>NET MOVEMENT IN FUNDS</b>		<b>(1,327,765)</b>	<b>337,906</b>	<b>(989,859)</b>	162,354
Total funds brought forward		2,922,160	1,140,069	<b>4,062,229</b>	3,899,875
<b>TOTAL FUNDS CARRIED FORWARD</b>		<b>1,594,395</b>	<b>1,477,975</b>	<b>3,072,370</b>	<b>4,062,229</b>
All operations of Orbis UK continued throughout both years. There were no gains or losses other than the deficit for the year.					

**BALANCE SHEET AS AT 31 DECEMBER 2015**

	Note	2015 (£)	2014 (£)
<b>FIXED ASSETS</b>			
Tangible assets	14	<b>41,883</b>	47,010
<b>CURRENT ASSETS</b>			
Debtors	15	<b>932,794</b>	924,461
Investments	16	<b>35,812</b>	-
Short term deposits		<b>1,799,685</b>	3,322,876
Cash at bank and in hand		<b>1,642,428</b>	1,530,318
		<b>4,410,719</b>	5,777,655
Creditors: amounts falling due within one year	17	<b>(1,380,232)</b>	(1,762,436)
<b>NET CURRENT ASSETS</b>		<b>3,030,487</b>	4,015,219
<b>NET ASSETS</b>		<b>3,072,370</b>	<b>4,062,229</b>
<b>FUNDS</b>			
<b>UNRESTRICTED FUNDS</b>			
General reserve		<b>1,008,472</b>	1,000,000
Designated funds		<b>585,923</b>	1,922,160
		<b>1,594,395</b>	2,922,160
<b>RESTRICTED FUNDS</b>		<b>1,477,975</b>	1,140,069
<b>TOTAL FUNDS</b>	18	<b>3,072,370</b>	<b>4,062,229</b>
The financial statements were approved and authorised for issue by the Board on 8 July 2016.			

Trustee: Peter Hickson

Trustee: A.F. Bowler

CASH FLOW STATEMENT YEAR ENDED 31 DECEMBER 2015

	Note	2015 (£)	2014 (£)
<b>CASH FLOWS FROM OPERATING ACTIVITIES:</b>			
Net cash (used in) provided by operating activities	A	(1,388,645)	531,873
<b>CASH FLOWS FROM INVESTING ACTIVITIES:</b>			
Interest and income from investments		26,325	40,629
Acquisition of investments		(35,812)	-
Purchase of property, plant and equipment		(12,949)	(37,095)
<b>NET CASH PROVIDED BY (USED IN) INVESTING ACTIVITIES</b>		<b>(22,436)</b>	<b>3,534</b>
Change in cash and cash equivalents in the reporting period		(1,411,081)	535,407
Cash and cash equivalents at the beginning of the year	B	4,853,194	4,317,787
<b>CASH AND CASH EQUIVALENTS AT THE END OF THE YEAR</b>	<b>B</b>	<b>3,442,113</b>	<b>4,853,194</b>

NOTES TO THE CASH FLOW STATEMENT:

A. RECONCILIATION OF CASH FLOWS FROM OPERATING ACTIVITIES

	2015 (£)	2014 (£)
Net (expenditure)/income for the year	(989,859)	162,354
Depreciation charges	18,076	33,607
(Gains) on investments	(26,325)	(40,629)
(Increase) in debtors	(8,333)	(473,762)
(Decrease)/increase in creditors	(382,204)	850,303
<b>NET CASH (USED IN) PROVIDED BY OPERATING ACTIVITIES</b>	<b>(1,388,645)</b>	<b>£531,873</b>

B. ANALYSIS OF CASH AND CASH EQUIVALENTS

	2015 (£)	2014 (£)
Short-term	1,799,685	3,322,876
Cash at bank and in hand	1,642,428	1,530,318
<b>TOTAL CASH AND CASH EQUIVALENTS</b>	<b>3,442,113</b>	<b>4,853,194</b>

NOTES TO THE FINANCIAL STATEMENTS  
YEAR ENDED 31 DECEMBER 2015

1. COMPANY INFORMATION

Orbis Charitable Trust (Orbis UK) is a registered charity and as such is a non-profit making organisation, limited by guarantee and therefore with no share capital. The number of members at 31 December 2015 is 16 and their liability on a liquidation is limited to £1 each. Orbis UK is registered as a limited liability company in England and Wales under number 3303689 and its registered office is Fourth Floor, Fergusson House, 124-128 City Road, London, EC1V 2NJ. Orbis UK is a Public Benefit Entity registered with the Charity Commission under number 1061352.

The financial statements have been prepared under the historical cost convention in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102), the Companies Act 2006 and the Statement of Recommended Practice applicable to 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. The date of transition to FRS 102 was 1 January 2014 and in preparing the financial statements, the Trustees have considered whether the accounting policies required by the standard require the restatement of comparative information.

Orbis UK constitutes a public benefit entity as defined by FRS 102.

Orbis UK's key activities are the relief of persons suffering from blindness and the prevention and cure of blindness by the provision of training, education and counselling and the conduct of research into the causes and cure of blindness and sight deficiencies and the publication of the useful results of that research for the public benefit.

2. KEY JUDGEMENTS AND ASSUMPTIONS

In the application of the charity's accounting policies, which are described in note 4, Trustees are required to make judgements, estimates, assumptions about the carrying values of assets and liabilities that are not readily apparent from other sources. The estimates and underlying

assumptions are based on historical experience and other factors that are considered to be relevant. Actual results may differ from these estimates.

The estimates and underlying assumptions are reviewed on an on-going basis. Revisions to accounting estimates are recognised in the period in which the estimate is revised if the revision affects only that period, or in the period of the revision and future periods if the revision affects the current and future periods.

The key sources of estimation uncertainty that have a significant effect on the amounts recognised in the financial statements are described in the accounting policies and are summarised below:

Residuary legacies – The charity recognises residuary legacies once probate has been granted which therefore requires an estimation of the amount receivable.

3. PRESENTATION CURRENCY

The functional currency of Orbis UK is considered to be in pounds sterling because that is the currency of the primary economic environment in which the charity operates. The financial statements are presented in pounds sterling.



4. ACCOUNTING POLICIES

The principal accounting policies adopted, judgements and key sources of estimation uncertainty in the preparation of the financial statements are as follows:

a) Basis of preparation

The financial statements have been prepared under the historical cost convention in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102), the Companies Act 2006 and the Statement of Recommended Practice applicable to 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. The date of transition to FRS 102 was 1 January 2014 and in preparing the financial statements, the Trustees have considered whether the accounting policies required by the standard require the restatement of comparative information.

The accounts (financial statements) have been prepared to give a 'true and fair' view and have departed from the Charities (Accounts and Reports) Regulations 2008 only to the extent required to provide a 'true and fair view'. This departure has involved following 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) issued on 16 July 2014 rather than the Accounting and Reporting by Charities: Statement of Recommended Practice effective from 1 April 2005 which has since been withdrawn.

Orbis UK constitutes a public benefit entity as defined by FRS 102.

Having reviewed the financial position the Trustees have a reasonable expectation that the charity has adequate resources to continue its activities for the foreseeable future. Accordingly, they continue to adopt a going concern basis in preparing the financial statements.

b) Fund accounting

Unrestricted funds are expendable at the discretion of the Trustees in furtherance of the objects of Orbis UK. The fund comprises the accumulated surpluses and deficits of unrestricted income and expenditure.

The Trustees have designated certain funds within unrestricted funds for specified purposes ('Designated Funds' – Note 18)

Restricted funds are funds subject to specific trusts, which may be declared by the donors or with their authority by the terms of an appeal, but still within the objects of Orbis UK.

c) Income

Donations are recognised in the financial statements when received. Legacies are recognised once the charity become entitled to the legacy, is certain of receipt and can measure the amount of the legacy with reasonable accuracy. Grants are recognised when received or receivable.

d) Gifts in kind and donated services

Medical supplies and other items and services received are included as income at value to the charity and as resources expended at the same value when distributed.

e) Expenditure

Expenditure is accounted for when incurred.

Cost of generating funds comprises fundraising costs associated with generating voluntary income.

Charitable activities comprises all expenditure on activities directly relating to the objects of Orbis UK, including the payments of grants, direct programme expenditure and the costs of supporting charitable activities.

Support costs comprise staff involvement with Orbis UK programmes and central costs (including management, finance, IT and other support costs) and are allocated to activities on the basis of staff time or another basis consistent with the use of resources.

4. ACCOUNTING POLICIES (CONTINUED)

Governance costs are those expenses incurred in compliance with constitutional and statutory requirements.

Payments in foreign currency are translated at the actual rate on the date of the transaction.

f) Tangible fixed assets and depreciation

Tangible fixed assets are stated at cost including any incidental expenses of acquisition. Assets costing more than £1,500 are capitalised.

Depreciation is provided on all tangible fixed assets at rates calculated to write off the cost over their expected useful economic lives as follows:

**Computer equipment** – 20 per cent straight line

**Office equipment** – 20 per cent straight line

**Leasehold improvements** – over the remaining length of the lease, which has been taken as the date of the break option of 4 August 2018 even though lease expires on 3 August 2023

g) Debtors

Trade and other debtors are recognised at transaction price. Prepayments are valued at the amount prepaid.

h) Investments

Listed investments are included in the Balance Sheet at market value.

i) Short term deposits

Short term deposits and cash at bank are split on the basis of a working capital requirement of three months' expenditure.

j) Cash at bank and in hand

Cash at bank and cash in hand includes cash and short term highly liquid investments with a short maturity of three months or less from the date of acquisition or opening of the deposit or similar account.

k) Creditors

Creditors and provisions are recognised where the charity has a present obligation resulting from a past event that will probably result in the transfer

of funds to a third party and the amount due to settle the obligation can be measured or estimated reliably. Short term trade creditors are measured at the transaction price.

l) Pension costs

During the year the charity contributed to a defined contribution Group Personal Pension Plan. The contributions are charged to the Statement of Financial Activities when incurred. All contributions are accounted for in unrestricted expenditure.

m) Operating leases

Rentals under operating leases are charged on a straight line basis over the lease term.

n) Liabilities

Grants are recognised in the accounts once a legal or constructive obligation has been created.

o) Financial Instruments

Orbis UK has financial assets and financial liabilities of a kind that qualify as basic financial instruments. Basic financial instruments are initially recognised at transaction value and subsequently measured at amortised cost using the effective interest method. Financial assets held at amortised cost comprise cash at bank and in hand, together with trade and other debtors. Financial liabilities held at amortised cost comprise bank loans and overdrafts, trade and other creditors.

At the balance sheet date the charity held financial assets at amortised cost of £4,196k (2014 £5,671) and Financial liabilities at amortised cost of £1,216k (2014 £1,728k).

**NOTES TO THE FINANCIAL STATEMENTS (CONTINUED)**  
**YEAR ENDED 31 DECEMBER 2015**

**5. COMPARATIVE STATEMENT OF FINANCIAL ACTIVITIES**

	Unrestricted funds 2014 (£)	Restricted funds 2014 (£)	Total 2014 (£)
<b>INCOME FROM:</b>			
Donations and legacies	3,664,054	2,036,898	5,700,952
Investments	40,629	-	40,629
<b>TOTAL INCOME</b>	<b>3,704,683</b>	<b>2,036,898</b>	<b>5,741,581</b>
<b>EXPENDITURE ON:</b>			
Raising funds	1,061,500	2,582	1,064,082
Charitable activities:			
Comprehensive eye care	728,288	799,933	1,528,221
Childhood blindness	575,024	617,798	1,192,822
Specialist training	820,285	417,568	1,237,853
Advocacy	490,886	129	491,015
Governance	65,234	-	65,234
Total expenditure on charitable activities	2,679,717	1,835,428	4,515,145
<b>TOTAL EXPENDITURE</b>	<b>3,741,217</b>	<b>1,838,010</b>	<b>5,579,227</b>
<b>NET INCOME/ EXPENDITURE</b>	<b>(36,534)</b>	<b>198,888</b>	<b>162,354</b>
Total funds brought forward	2,958,694	941,181	3,899,875
<b>TOTAL FUNDS CARRIED FORWARD</b>	<b>2,922,160</b>	<b>1,140,069</b>	<b>4,062,229</b>

**NOTES TO THE FINANCIAL STATEMENTS (CONTINUED)**  
**YEAR ENDED 31 DECEMBER 2015**

**6. INCOME FROM DONATIONS AND LEGACIES**

	Unrestricted funds 2015 (£)	Restricted funds 2015 (£)	Total 2015 (£)	Total 2014 (£)
Donations	1,703,802	917,979	2,621,781	3,408,968
Legacies	770,278	-	770,278	1,996,011
Grants	-	570,163	570,163	295,973
<b>TOTAL INCOME FROM DONATIONS AND LEGACIES</b>	<b>2,474,080</b>	<b>1,488,142</b>	<b>3,962,222</b>	<b>5,700,952</b>

**7. INCOME FROM GRANTS**

		Unrestricted funds 2015 (£)	Restricted funds 2015 (£)	Total 2015 (£)	Total 2014 (£)
Government of Jersey	Zambia – Kitwe paediatric centre	-	87,318	87,318	78,295
	Ethiopia – Gamo Gofa & South Omo	-	48,864	48,864	98,932
	Cameroon – Yaounde Central Hospital	-	99,931	99,931	-
		-	236,113	236,113	177,227
States of Guernsey	Ethiopia Kembata Tembaro Zone	-	-	-	33,325
		-	-	-	33,325
Sightsavers	Ethiopia – Trachoma mapping	-	-	-	19,671
	DFID SAFE Inception period	-	-	-	54,330
	DFID SAFE HeadStart programme	-	-	-	11,420
		-	-	-	85,421
Qatar Development Fund	Qatar Creating Vision	-	334,050	334,050	-
		-	334,050	334,050	
<b>TOTAL INCOME FROM GRANTS</b>		<b>-</b>	<b>570,163</b>	<b>570,163</b>	<b>295,973</b>

The following unfulfilled conditions were attached to government grants as at 31 December 2015: £5,292 was remaining to be spent in 2016 of the Government of Jersey for the Yaounde Central Hospital in Cameroon.



**NOTES TO THE FINANCIAL STATEMENTS (CONTINUED)**  
**YEAR ENDED 31 DECEMBER 2015**

**8. INCOME FROM CONTRACTS**

	2015 (£)	2014 (£)
DFID SAFE Trachoma elimination programme	770,409	-
<b>TOTAL CONTRACT INCOME</b>	<b>770,409</b>	<b>-</b>

**9. GIFTS IN KIND AND DONATED SERVICES**

The following gifts in kind and donated services were received:

	2015 (£)	2014 (£)
Programme support in the form of glasses, lenses, books and medical equipment	48,079	127,545
Staff training workshop	-	3,422
Artwork for the Christmas appeal	1,500	-
Flights	3,179	-
<b>TOTAL GIFTS IN KIND AND DONATED SERVICES</b>	<b>52,758</b>	<b>130,967</b>

**10. NET INCOMING RESOURCES IS STATED AFTER CHARGING:**

The following gifts in kind and donated services were received:

	2015 (£)	2014 (£)
Payments under operating leases	50,000	50,000
Depreciation	18,076	33,607
Fees paid to the auditor:		
• Audit fees	14,200	16,680
• Other advisory services and training	-	503
• Tax advisory services	1,460	-

**NOTES TO THE FINANCIAL STATEMENTS (CONTINUED)**  
**YEAR ENDED 31 DECEMBER 2015**

**11. TOTAL RESOURCES EXPENDED**

The following gifts in kind and donated services were received:

	Activities Undertaken Directly (£)	Grant Funding (£)	Support Costs (£)	2015 Total (£)	2014 Total (£)
<b>COST OF GENERATING FUNDS</b>					
Cost of generating voluntary income	1,010,831	-	118,999	1,129,830	1,064,082
<b>CHARITABLE ACTIVITIES</b>					
Comprehensive eye care	290,822	1,769,444	106,641	2,166,907	1,528,221
Childhood blindness	255,794	800,004	85,313	1,141,111	1,192,822
Specialist training	211,709	477,371	63,985	753,065	1,237,853
Advocacy	239,094	248,068	10,664	497,826	491,015
Governance	-	-	60,076	60,076	65,234
	997,419	3,294,887	326,679	4,618,985	4,515,145
<b>TOTAL RESOURCES EXPENDED</b>	<b>2,008,250</b>	<b>3,294,887</b>	<b>445,678</b>	<b>5,748,815</b>	<b>5,579,227</b>

**GRANTS PAYABLE** Grants of £3,294,887 (2014: £3,114,588) were made during the year for projects managed by Orbis International and Orbis UK. £1,753,730 represents the expenditure of restricted donations received from donors for specific projects, details of these programmes are given in note 18 under Restricted Funds. The balance of £1,541,157 was directed to programmes in Ethiopia, Southern and Western Africa, Bangladesh and India and the Flying Eye Hospital on specific projects identified by the Trustees. Total support costs allocated to grant making activities totalled £266,603 (2014: £259,542).

**12. ANALYSIS OF SUPPORT COSTS**

	Support staff costs (£)	Facilities & Depreciation (£)	2015 Total (£)	2014 Total (£)
<b>COST OF GENERATING FUNDS</b>				
Cost of generating voluntary income	-	118,999	118,999	123,024
<b>CHARITABLE ACTIVITIES</b>				
Comprehensive eye care	26,112	80,529	106,641	90,840
Childhood blindness	20,890	64,423	85,313	77,862
Specialist training	15,668	48,317	63,985	51,909
Advocacy	2,611	8,053	10,664	38,931
Governance	28,805	31,271	60,076	65,234
	94,086	232,593	326,679	324,776
<b>TOTAL RESOURCES EXPENDED</b>	<b>94,086</b>	<b>351,592</b>	<b>445,678</b>	<b>447,800</b>

Support staff costs have been apportioned on the basis of staff time in each area of charitable activity. Facilities and depreciation costs have been allocated on the basis of staff time in each area across fundraising and charitable activities.

**NOTES TO THE FINANCIAL STATEMENTS (CONTINUED)**  
**YEAR ENDED 31 DECEMBER 2015**

**13. STAFF COSTS**

	2015 Total (£)	2014 Total (£)
Wages and salaries	1,156,052	1,035,275
Social security costs	109,595	98,648
Pension costs	56,750	43,821
<b>TOTAL</b>	<b>1,322,397</b>	<b>1,177,744</b>

Number of full time equivalent employees whose emoluments exceeded £60,000:

£60,000 - £70,000	2	1
£70,001 - £80,000	-	2
£80,001 - £90,000	1	-
£90,001 - £100,000	-	1
£100,001 - £110,000	1	-

Contributions in the year to pension schemes for these employees was £26,191. Remuneration in respect of key management personnel in the year was £378,354 (2014: £371,358).

The average number of employees, calculated on an average head count basis, analysed by function was:

	2015 No.	2014 No.
Cost of generating funds	11	11
Support costs	16	14
Governance	1	1
<b>TOTAL</b>	<b>28</b>	<b>26</b>

Orbis UK provides life assurance cover at four times annual gross salary for qualifying staff, the cost is approximately £200 per person per annum.

Two members of staff were made redundant in 2015 at a total cost of £11,445. Orbis UK's policy is to pay one week's pay for each year of service from the age of 22 to 41. The payments were made within 2015.

Expenses reimbursed to four Trustees amounted to £8,037 (2014: 6 Trustees totalling £13,530) in respect of travel and subsistence. Neither the Trustees nor any person connected with them have received any remuneration.

**NOTES TO THE FINANCIAL STATEMENTS (CONTINUED)**  
**YEAR ENDED 31 DECEMBER 2015**

**14. TANGIBLE FIXED ASSETS**

	Computer Equipment (£)	Office Equipment (£)	Leasehold Improvements (£)	Total (£)
<b>COST</b>				
At 1 January 2015	91,819	85,679	98,480	275,978
Additions	10,846	-	2,103	12,949
<b>AT 31 DECEMBER 2015</b>	<b>102,665</b>	<b>85,679</b>	<b>100,583</b>	<b>288,927</b>
<b>DEPRECIATION</b>				
At 1 January 2015	81,035	69,985	77,948	228,968
Charge for year	6,932	5,689	5,455	18,076
<b>AT 31 DECEMBER 2015</b>	<b>87,967</b>	<b>75,674</b>	<b>83,403</b>	<b>247,044</b>
<b>NET BOOK VALUE AT 31 DECEMBER 2015</b>	<b>14,698</b>	<b>10,005</b>	<b>17,180</b>	<b>41,883</b>
At 31 December 2014	10,784	15,694	20,532	47,010

**15. DEBTORS**

	2015 (£)	2014 (£)
Prepayments	89,646	63,104
Gift Aid	89,443	43,024
Other debtors	46,176	14,882
Accrued income	707,529	803,451
<b>TOTAL</b>	<b>932,794</b>	<b>924,461</b>

**16. INVESTMENTS**

	2015 (£)	2014 (£)
Listed investments	35,812	-



**NOTES TO THE FINANCIAL STATEMENTS (CONTINUED)**  
**YEAR ENDED 31 DECEMBER 2015**

**17. CREDITORS: AMOUNTS FALLING DUE WITHIN ONE YEAR**

	2015 (£)	2014 (£)
Trade creditors	51,217	136,575
Accruals	18,000	17,542
Grants payable	1,064,153	1,527,828
Tax and social security	35,235	34,122
Other creditors	211,627	46,369
<b>TOTAL</b>	<b>1,380,232</b>	<b>1,762,436</b>

Movement in recognised provisions and funding commitments during the year.

	Grant commitments accrued (£)
Grant commitments recognised as at 1 January 2015	1,527,828
New grant commitments charged to the Statement of Financial Activities in year	3,294,886
Grants paid during the year	(3,758,561)
Amount of grant commitments recognised as at 31 December 2015	1,064,153

**NOTES TO THE FINANCIAL STATEMENTS (CONTINUED)**  
**YEAR ENDED 31 DECEMBER 2015**

**18. STATEMENT OF FUNDS**

	Balance 1 Jan 2015 (£)	Income (£)	Expenditure (£)	Transfers (£)	Balance 31 Dec 15 (£)
<b>UNRESTRICTED FUNDS</b>					
General Reserves	1,000,000	2,487,456	(3,084,585)	605,602	<b>1,008,473</b>
<b>DESIGNATED FUNDS</b>					
Programme development & expansion	802,029	-	(531,409)	(270,620)	-
Ethiopia programme – Wolaita	409,151	-	(162,147)	-	<b>247,004</b>
Orbis International global initiatives	100,000	-	-	(20,000)	<b>80,000</b>
Fundraising development	253,970	-	(161,212)	(22,758)	<b>70,000</b>
Organisation development	310,000	-	(34,691)	(125,309)	<b>150,000</b>
Fixed assets	47,010	12,949	(21,041)	-	<b>38,918</b>
<b>TOTAL DESIGNATED FUNDS</b>	<b>1,922,160</b>	<b>12,949</b>	<b>(910,500)</b>	<b>(438,687)</b>	<b>585,922</b>
<b>TOTAL UNRESTRICTED FUNDS</b>	<b>2,922,160</b>	<b>2,500,405</b>	<b>(3,995,085)</b>	<b>166,915</b>	<b>1,594,395</b>
<b>RESTRICTED FUNDS</b>					
Windward Islands	1,801	-	-	-	<b>1,801</b>
Flying Eye Hospital (FEH) programmes	2,173	-	(2,173)	-	-
Country programmes	1,081,478	2,257,051	(1,750,057)	(166,915)	<b>1,421,557</b>
Public relations	1,492	-	-	-	<b>1,492</b>
MD10 new generation FEH	43,125	-	-	-	<b>43,125</b>
HR development & training	10,000	-	-	-	<b>10,000</b>
Gifts in kind – Xmas artwork	-	1,500	(1,500)	-	-
<b>TOTAL RESTRICTED FUNDS</b>	<b>1,140,069</b>	<b>2,258,551</b>	<b>(1,753,730)</b>	<b>(166,915)</b>	<b>1,477,975</b>
<b>TOTAL FUNDS</b>	<b>4,062,229</b>	<b>4,758,956</b>	<b>(5,748,815)</b>	<b>-</b>	<b>3,072,370</b>

**NOTES TO THE FINANCIAL STATEMENTS (CONTINUED)**  
**YEAR ENDED 31 DECEMBER 2015**

**18. STATEMENT OF FUNDS (CONTINUED)**

**UNRESTRICTED FUNDS**

**DESIGNATED FUNDS.** Designated funds are held for the following purposes:

**ETHIOPIA PROGRAMME – WOLAITA – £247,004** – this designation represents the anonymous donation received in 2012 which has been allocated to the Wolaita rural project. Due to the drought in 2015 the planned mass drug administration programme was deferred until 2016.

**ORBIS INTERNATIONAL GLOBAL INITIATIVES – £80,000** – this fund is to ensure that the MD10 launch and goodwill tours within the EMEA region during 2016 are supported.

**FUNDRAISING DEVELOPMENT – £70,000** – this fund is to be used to develop individual giving fundraising during 2016.

**ORGANISATIONAL DEVELOPMENT – £150,000** – this designation has been set aside to invest in strengthening the organisation in 2016 and 2017.

**FIXED ASSETS – £38,918** – this fund is the value of assets held as fixed assets which are not readily accessible as free reserves.

**RESTRICTED FUNDS**

**WINDWARD ISLANDS** – The restricted fund represents Orbis UK's interest in a project to prevent blindness among the Islands' population through a programme of education or preventative medicine.

**COUNTRY PROGRAMMES**

The expenditure was for programmes in the following areas of work:

	2015 Total (£)	2014 Total (£)
Comprehensive eye care	1,342,284	799,632
Childhood blindness	345,424	617,540
Specialist training	62,349	52,174
<b>TOTAL</b>	<b>1,750,057</b>	<b>1,469,346</b>

The fund balance of £1,421,557 for Country Programmes held at the year end, relates to funds received in advance for projects within the areas of Childhood blindness and Comprehensive eye care

**MD10** In 2015 no funds were raised specifically for the MD10 capital project (2014: £243,125), the replacement aircraft for the DC10 Flying Eye Hospital.

**TRANSFERS FROM RESTRICTED FUNDS** The transfer of £166,915 represents core running costs of the charity which were funded from restricted funds. Donors of restricted income agreed in advance to cover an allocation of core running costs to cover some of the expenditure required by Orbis UK to run these programmes.

**NOTES TO THE FINANCIAL STATEMENTS (CONTINUED)**  
**YEAR ENDED 31 DECEMBER 2015**

**19. ANALYSIS OF NET ASSETS BETWEEN FUNDS**

	Unrestricted Funds	Restricted Funds	Total Funds (£)
Tangible fixed assets	41,883	-	41,883
Current assets	2,364,920	2,045,799	4,410,719
Grants payable	(496,328)	(567,824)	(1,064,152)
Other current liabilities	(316,080)	-	(316,080)
<b>TOTAL NET ASSETS</b>	<b>1,594,395</b>	<b>1,477,975</b>	<b>3,072,370</b>

**20. FINANCIAL COMMITMENTS**

At 31 December Orbis UK had annual commitments under an operating lease expiring in August 2018 as follows:

	2015 Total (£)	2014 Total (£)
Within one year	29,166	50,000
Between two and five years	-	29,166

In 2015 £50,000 (2014: £50,000) was paid under an operating lease. Orbis UK had no capital commitments at the end of the year (2014: none).

**21. RELATED PARTIES**

- a.** Orbis UK is an affiliate of and has a memorandum of understanding (MoU) with Project Orbis International Inc, a not for profit organisation registered in New York. The MoU includes the use of the trademark and how the two organisations will work together. Robert Walters, Michael Boyd and James Forbes serve as Directors of Orbis International.

The expenditure incurred during 2015, with respect to Orbis International projects amounted to £1,974,258 (2014: £2,059,712) and covers grants payable for programmatic work in Bangladesh, Ethiopia, India, Nepal, the Flying Eye Hospital, telemedicine and the capital campaign for the replacement Flying Eye Hospital. The outstanding balance due to Orbis International at 31st December 2015 was £1,064,153 (2014: £1,527,878).

- b.** Orbis Africa, a non profit company with public benefit organisation status was registered in South Africa in April 2012. Robert Walters and Nigel Young are Directors and Rebecca Cronin and Lene Øverland are ex-officio Directors of Orbis Africa.

Orbis UK provides funding for projects in Zambia and Cameroon and towards the running costs of the organisation. The total expenditure funded by Orbis UK in the year was £1,049,703 (2014: £664,197). The outstanding balance due to Orbis Africa at 31st December 2015 was £2,878 (2014: £27,634).

- c.** Orbis Ireland is a company limited by guarantee, registered in Ireland in 2005, Michael Boyd and Maurice Cox are Directors of Orbis Ireland and Orbis UK. No financial transactions have taken place between the two organisations in 2015.

- d.** During the year there were no related party transactions with any of the Trustees.



**TRUSTEES AND OFFICERS**  
**YEAR ENDED 31 DECEMBER 2015**

Listed below are the Ambassadors, current and past Trustees who served during the year, together with the names of the Chief Executive Officer, Senior Management Team and external advisers.

**AMBASSADORS**

Ann-Marie Ablett  
Brian Little  
Robin Pinchbeck  
Sunil Ruia  
Emad Turkman  
Henry Wyndham  
Toby Young

**TRUSTEES**

Peter Hickson (Chairman)  
Sir Michael Arthur  
Larry Benjamin  
Michael Boyd  
Kit Braden  
Bruce Buck  
Anthony Cowles  
Maurice Cox  
James Forbes  
Mary Killen (resigned 8 July 2016)  
Nag Rao  
Melanie Richards  
Christine Tomkins  
Charles Vyvyan  
Robert Walters  
Nigel Young

**CHIEF EXECUTIVE OFFICER**

Rebecca Cronin

**SENIOR MANAGEMENT**

Kath Backhouse  
David Bennett  
Jennifer Sheils  
Allan Thompson

**REGISTERED OFFICE**

Fourth Floor, Fergusson House  
124–128 City Road, London, EC1V 2NJ

**AUDITORS**

Crowe Clark Whitehill LLP  
St Bride's House, 10 Salisbury Square  
London, EC4Y 8EH

**BANKERS**

Barclays Bank PLC  
Hatton Garden, London, EC1N 8DN

**SOLICITORS**

Bates, Wells & Braithwaite  
2–6 Cannon Street  
London EC4M 6YH



**THANK YOU.**  
**WE LOOK FORWARD**  
**TO REPORTING OUR**  
**2016 DEVELOPMENTS**

## NOTES

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## NOTES

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