

A photograph of several elderly women, likely in a developing country, with white bandages secured by wooden sticks over their eyes. They are standing in a line, and the background is slightly blurred, showing other people. The women have various expressions, some looking towards the camera.

**EYE  
CARE**  
FOUNDATION

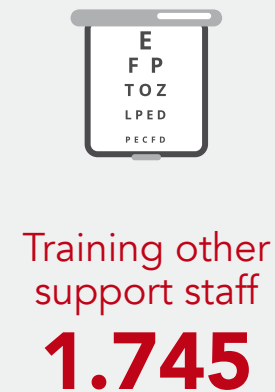
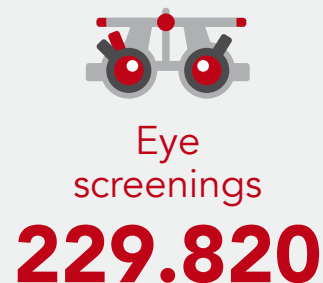
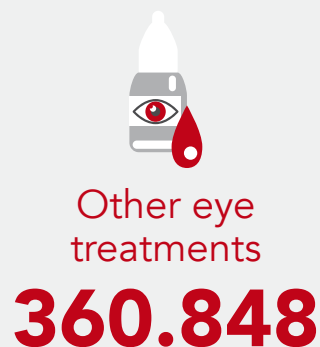
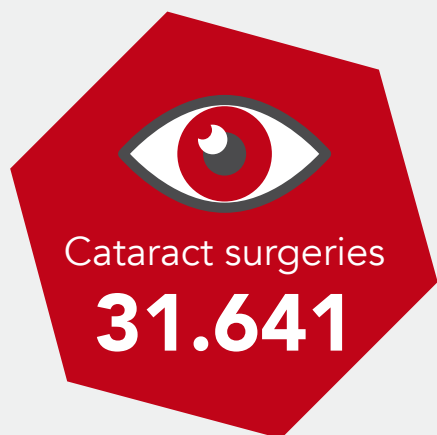
# A good cause in sight

Eye Care Foundation  
Annual Report 2016



# 2016 at a glance

Eye Care Foundation supported projects in four Asian countries and one African country with the aim of controlling and preventing avoidable blindness and visual impairment.





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# **Board of Directors & Management Report**





# Preface

Can we look back on last year's results with satisfaction?

The 2016 results were only possible with the involvement and dedication of donors like you, the project backers and occasional donors. Nor could we have achieved this without the efforts of our volunteers, the medical advisers, the organizational, administrative and fundraising support staff who have selflessly helped us for years.

We are pleased to report that Eye Care Foundation's aid to the project in Moshi, Tanzania is no longer necessary. Since 2009, Eye Care Foundation has funded the education of ophthalmologists in the Kilimanjaro Christian Medical Centre (KCMC). Thanks to the Dutch ophthalmologists teaching at the medical faculty connected to the KCMC, the KCMC eye team has been strengthened. The Tanzanian ophthalmologists of KCMC will now be training the students wholly independently. We are grateful for the assistance of our donors in making this happen.

We have also made progress in other project countries too. In Nepal, part of the emergency relief aid (created by donors after the earthquake in 2015) was spent on rebuilding six homes of staff of the Himalaya Eye Hospital in Pokhara. More relief supplies were allocated to earthquake victims and the reconstruction of five toilet blocks at different schools in Gorkha. A more detailed description of these projects is provided later in this annual report.

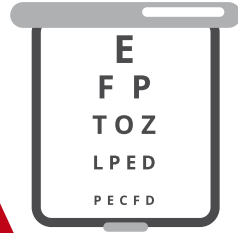
An important priority for fundraising has been reaching out to new donors and holding on to existing donors. In addition, new sources of income were found in partnerships with foundations and commercial parties like Lensdeal and Mr. Eyes.

Board member Cees van Dijn and chair Rob van Rooijen have left us. We extend our thanks to them for their years of dedicated service.

Cees van Dijn has been replaced by Linda Hummel. I am taking on the role of chair.

We believe that the question of whether we can be satisfied with the 2016 results can be answered in the affirmative. We hope we can continue to count on your support in order to achieve our objectives.

Thijs van Praag, Chair Eye Care Foundation



## Mission

Eye Care Foundation is a Non-Governmental Organization with the aim to contribute to the fight against avoidable blindness and visual impairment in developing countries. Furthermore, Eye Care Foundation has committed itself to further awareness of these issues in Dutch society.

## Vision



A world in which avoidable blindness no longer limits people's potential. A world with no more inequality between people concerning access to eye care, and where everybody has an equal opportunity to build their own future, with a clear focus.

# Goals, policy and strategy

Eye Care Foundation was created to address the need to establish and enhance good and affordable eye care in developing countries with support from the Netherlands. Initially, we operated mainly in remote areas, providing cataract operations that enabled people to fully play their part in the community. Later we began to put more focus on education and infrastructure. By facilitating training programmes, we help to expand local capacity building. Infrastructure is strengthened through the construction of eye clinics and the donation of equipment.

Eye Care Foundation has projects in the Himalayan region (Nepal), South East Asia (Vietnam, Cambodia, Laos) and in Africa (Tanzania). Support is most successful when in these regions a network of eye care facilities arises with well-trained local staff, volunteers, appropriate equipment and adequate housing. The goal of our project support is to foster these networks, which must ultimately be able to support themselves both financially and in terms of knowledge. Embedding these local networks into local politics is important to ensure sustainability, continuity and quality. From the Netherlands and through the field offices in Nepal, Vietnam and Cambodia, general support and medical management are provided to our project

partners, which enables local partners to organize and perform the necessary eye care increasingly on their own.

## Guiding objectives

Eye Care Foundation makes use of a long-term strategic plan, which is shaped in annual plans. The guiding principles for the coming years are set out in the long-term strategic plan.

First, we strive to work towards preventing and curing avoidable blindness of visually impaired people in developing countries. Secondly, we aim to inform the public in the Netherlands and raise awareness.

The long-term plan details guiding objectives in the fields of:

- Project support: the geographical priorities have been set; the relationship with and the role of the field offices has been worked out; the potential for growth has been assessed, project support is aimed at embedding in national eye care infrastructures; differentiation by size and duration has been optimized.
- Fundraising: a balanced distribution of funds from donations by individuals and from project financing; a fundraising system that is profitable enough to justify the expenses; increase revenue, in the corporate and institutional markets as well as the private market.



- Awareness: increase support in Dutch society; a regional approach to inform the Dutch community about avoidable blindness and visual impairment in developing countries.
- Finances, planning and control: an adequate system of periodic financial reports; an administrative system that complies with the guidelines laid out in 'Richtlijn 650' (directive 650) for financial reporting by fundraising institutions.
- Human Resource Management (HRM): adequate policy regarding the use of remunerated and voluntary staff in the office in both the Netherlands office and the field offices.

The summary above is not exhaustive, but serves to illustrate the policy agreements that were made. The long-term policy plans also include long-term budgets, which outline the goals for each expense category and estimate the required revenue.

### Planning, monitoring and evaluation

Eye Care Foundation has a system for setting out project information in a uniform manner, and defining the relationship with the field offices. This system makes it possible to describe the objectives, the expected results and the significance of the projects to the target group in a measurable way.

For long-term projects, the project management periodically issues progress reports listing the actual expenditure and the results achieved. Upon completion, a final evaluation is drawn up stating the financial and other results.

The management informs the board on a quarterly basis on the progress of current projects, and on the effectiveness of the use of budgeted resources.

## Investments

Eye Care Foundation places the resources entrusted to it in responsible and sound short- and long-term investments. It is important to us to give more priority to a defensive investment policy than to returns. With this in mind, the available resources are held in liquid funds and, where not required elsewhere, money for day-to-day operations is kept in a savings account for that purpose. This entails that the interest rate must be in accordance with market conditions and the liquid assets may only be deposited in financial institutions with outstanding credit ratings. Eye Care Foundation only retains, in accordance with the Guideline for Annual Reporting by Fundraising Institutions, these specifically allocated reserves.



# Salary policy

Eye Care Foundation follows a market-based remuneration policy. This means that the remuneration is in line with that of more or less comparable non-profit organizations, also in terms of the size of the organization. This policy prevents payments of excessively high salaries and simultaneously ensures a sufficiently strong negotiating position to recruit professional, qualified staff. The salary of the director is in accordance with the 'Adviesregeling Beloning Directeuren' (Remuneration Guidelines for Directors of Non-Profit Organizations) by 'Goede Doelen Nederland' (formerly VFI).



## Capital

The foundation pursues a conservative financial policy. The management conducts regular reviews of the equity position. The financial consequences of projects are assessed individually; only if sufficient funding is available, is a commitment entered into. Designated funds contain resources obtained from donors for specific projects or activities.

Designated reserves contain funds that have been obtained and allocated with specific purpose by the board, to fulfil a project objective. Most of the projects supported by Eye Care Foundation run for several years. Provisions made by the Board regarding allocated reserves include both short and long-term projects, in order to fulfil the foundation's promises and responsibilities.

### Adaptations based on evaluations

In projects executed by Eye Care Foundation, the project director will make adjustments when necessary, based on evaluations made in the field. Wherever Eye Care Foundation entrusts the implementation of projects to other bodies (acting only as project backer), continued financing will be dependent on periodic project evaluations and reports. Concrete agreements on these matters will be set out in the project contract.

Communication materials as part of educational activities are periodically evaluated and adapted by the communications officer with regard to results and relevance.

### Results

In order to measure and ascertain the extent to which Eye Care Foundation's activities produce results, the foundation uses a system that divides the projects into phases and measurable units.

# Governance and supervision

Eye Care Foundation has a supervisory Board consisting of five members. It has delegated a significant part of its tasks to an Executive Director, who implements as well as initiates the foundation's policies. The director manages the foundation's executive organization and performs his duties according to a set of regulations describing the director's responsibilities and authority. The director is accountable to the Board.

The Board approves the policies and annual plans and budgets that are prepared by the management and reviews them thoroughly. By doing so, the organization ensures that administrative and supervisory positions remain strictly segregated. Where necessary, the director will call on the expertise of board members to assist with implementation.

The supervisory board of Eye Care Foundation met four times in 2016. The most important topics included:

- Adoption of the 2015 Annual Report
- Vision and long-term policy for the coming years
- Determining the 2017 Annual Plan and discussing the 2017 Budget
- Opportunities and threats with regards to fundraising
- HRM policy

- Reporting and accountability of management to the board
- Self-evaluation

## Netherlands office

The primary tasks of the Amsterdam office are fundraising and managing, evaluating and supporting progress of the projects as well as managing the allocated resources. Other office responsibilities include contacting donors and communication with Dutch society, as well as establishing and maintaining international contacts.

Ruud Wiedijk (0.4 FTE) is the Executive Director of Eye Care Foundation. Yvonne Reifler (0.9 FTE) is Head of Projects and responsible for the realization of the foundation's project goals. Elise Kenter (0.6 FTE) is programme officer for

Vietnam and Laos. Rudolf van der Helm became programme officer for Vietnam and Laos as of 1 November (temporarily replacing Elise Kenter during her maternity leave). Maaïke van Veen (0.9 FTE) is Head of Fundraising and Communication. Margreet Geels (0.8 FTE) is responsible for Communication and Awareness, as well as donor contacts. Tessa Wortman (0.9 FTE) is Communications and Fundraising Officer. Bas van Leeuwen is Head of Finance. Fatma Ergincanli (0.5 FTE) was Finance and Administration Officer (until May 1st.).

In addition to these paid employees, a number of volunteers were hard at work for Eye Care Foundation.

Lia Marmelstein supported the communication and fundraising officers one day a week, and



also travelled to Laos and Cambodia in October as photographer for Eye Care Foundation in order to document the opening of the two new eye clinics in those regions. Laurine Nuij also supported the communication and fundraising department and the projects one day a week.

For ophthalmology affairs, Eye Care Foundation has been able to rely on the advice and support of ophthalmologists Marius den Boon (medical adviser for Tanzania), Hedwig Kemme (medical adviser for Cambodia), Coen Hiemstra (medical adviser for Nepal), The An Mai (medical adviser for Vietnam) and Cees van der Wind (medical adviser for Laos).

Eye Care Foundation also received occasional support from a variety of other ophthalmic specialists.

## Composition of the Board

The Board of Directors of Eye Care Foundation is assembled on the basis of the following desired profiles:

- Medical /Ophthalmic expertise
- HRM expertise
- Financial/administrative expertise
- Fundraising/marketing expertise

Members of the Board are appointed for one

term of four years with a maximum of one reappointment. There is a rotation schedule. Board members receive no financial compensation for their activities for the foundation.

## Evaluation of the performance of the Board

The Board evaluates its own performance annually.

## Evaluation of the performance of the Executive Director

The Executive Director's performance is evaluated on a yearly basis by way of an interview executed by a delegation of the Board of Directors. This evaluation is based on the rules and regulations for managing directors, the annual plan and the annual budget. The minutes of this interview are filed in the personnel file, and its outcome is verbally conveyed to the entire Board of Directors.

## Good governance

Eye Care Foundation complies with the general requirements related to 'good governance' and the applied principles. Eye Care Foundation also heeds the published advice by the 'Wijffels Committee' issued to 'Goede Doelen Nederland' (previously VFI) in 2005, regarding the code of

good governance of non-profit organizations. The assessment criteria of the Centraal Bureau Fondsenwerving (Central Fundraising Bureau; CFB), as applicable to Eye Care Foundation in 2008, were integrated into the 'Wijffels Committee' advice.

The Board has fixed the remuneration policy, the level of executive remuneration and the level of other remuneration components. The policy is updated periodically. In fixing the remuneration of the Executive Director, the Board follows the recommendations described in the Remuneration Guidelines for Directors of Non-Profit Organizations drawn up by 'Goede Doelen Nederland'. The guidelines provide recommendations for maximum annual income based on a fixed set of criteria.





# Risk management

Eye Care Foundation aims to identify, analyze and cover as many risks as possible inherent in its activities and processes. We wish to prevent risks from becoming realities and, if they cannot be avoided, limit potential damage. Therefore, we take certain control measures to guard against risk in advance. The most important risk is losing touch with our support base, which could trigger a decline in income along with reputation damage. Other risks like financial and operational risks are also continually monitored.

## Reputation

We must maintain a good reputation in order to carry out our work. Damage to our image can result in fewer donors and volunteers. That would mean we would have less time and fewer resources to dedicate to our objectives. As we are highly conscious of our social responsibility, we try to maintain good relationships with our stakeholders and ensure transparency in our operations.

## Financial

For the resources that are entrusted to us, our top priority is to optimize spending of the resources entrusted to us on our goals. By managing processes and additional guidelines, we can carefully attend to this priority. In particular, we are on the look-out for risks associated with cash flows, and we

make sure that all our expenditure is efficient and directed. We maintain financial reserves so as to continue to be able to meet our long-term financial obligations, such as multi-year grants we have received for projects.

## Operational

We aim to continually improve our internal processes. In 2016, the internal control systems the company uses to manage risk were sufficiently functional.

# Financial

Eye Care Foundation reports its finances on the basis of the RJ Directive 650, which outlines the principles of financial reporting for fundraising organizations.

## Profit and loss statement

The profit and loss statement shows the real profits and costs in 2016 relative to both the budgeted amounts for 2016 and the actual figures from 2015.

Eye Care Foundation closed the 2016 financial year with a positive balance of €1,555,727, while the foreseen deficit amounted to €10,468. The 2016 revenue was €1,927,131 higher than in 2015 and €1,869,963 more than the budgeted amount; costs were €452,439 higher than a year earlier and worked out €324,704 more than the budgeted amount. The considerably higher income comes from an exceptional estate received in 2016. As a result, we exceeded the permissible limit for income from estates by €1,936,254. In the coming years, this extra income will be put towards increasing our spending on objectives; plans to this end are in development. In 2016 objectives spending was €272,386 higher than budgeted. This increase is due to the increased spending started in 2016

on projects/structural aid (€161,668) and on education/raising awareness (€110,718).

The mailing results were extremely positive and exceeded the budgeted amount. Income from donations was lower than in 2015 and lower than budgeted. Income from project financing exceeded that of 2015, but the budgeted amount was not reached. Income from campaigns was lower than last year and lower than budgeted.

Spending on projects in 2016 worked out €161,668 higher than budgeted and €274,696 higher than in 2015. The costs of education and awareness-raising also exceeded the amount budgeted for 2016 by €110,718. Expressed as a percentage of all 2016 expenditure, 78.5% (2015: 74.7%) was spent on our objectives.

The costs for own fundraising were higher than the amounts both budgeted for and incurred in 2015. As a percentage of the proceeds from

own fundraising, the associated costs for 2016 totalled 9.4% (2015: 18.4%).

For Management and Administration expenses (based on the Kosten B&A recommendation prepared by 'Goede Doelen Nederland', Eye Care Foundation adheres to a standard of 5-7.5%. Expenses for finance, planning and control (including accounting and administrative costs and including expenses of the Board), all fall under Management and Administration costs. For other operating costs of the organization, a 'pro rata' allocation applies. Management and administration costs amount to 4.9% (2015: 6.1%) of the total expenditure.

## Balance sheet

The funds and reserves held by Eye Care Foundation are divided into designated funds, earmarked reserves (Eye Care Foundation does not hold indeterminate reserves) and a continuity reserve.

With respect to the continuity reserve, Eye Care Foundation employs the directive of the 'Centraal Bureau Fondsenwerving' (Central Bureau on Fundraising), CBF, that the reserve should, at the most, consist of 1.5 times the annual expenses for the organization.

The designated funds include funds to which third parties (the donors) have allocated limited applications (earmarked or labelled donations). Eye Care Foundation is not free to adjust these designations.

Eye Care Foundation has limited the application of designated reserves. Eye Care Foundation usually commits itself to long-term projects; the designated reserves are therefore maintained in order to ensure capacity for these long-term commitments. These reserves are managed annually by the Board, based on the current project obligations.

Of the total amount of reserves and funds, €3,048,378 (2015: €1,492,651), an amount of €1,451,698 (2015: €554,361) has been set aside, partly for long-term financial commitments and partly for purposes already determined by

the donors. A continuity reserve of €1,088,109 serves as a buffer to cover short-term risks and to ensure capacity for Eye Care Foundation's future long-term commitments.

The sum total of reserves and funds is matched by sufficient liquidity. Eye Care Foundation utilizes an extremely conservative investment policy. To render risk-free interest, almost all of its funds are therefore put into savings accounts.



# Relationships with stakeholders

From the start, Eye Care Foundation has placed great value on maintaining good relationships with stakeholders. Over the course of time, a number of networks of great importance to the foundation have formed, consisting of subsidizers, donors and other stakeholders. The various groups of stakeholders with which the foundation maintains specific contact are mentioned below.

## Communication with donors and major donors

The foundation keeps its donors up-to-date through a newsletter that is distributed online and by mail twice a year. Donors also receive information on specific projects. We are very interested in the opinions of all our supporters. Personal contact is therefore maintained with donors interested in particular fields of activity, or who have a specific history as a donor.

## Communication with (subsidized) organizations

Eye Care Foundation maintains functional and professional relations with the companies it subsidizes in order to guarantee informed assessments and evaluations. Project partners keep in regular contact with the office in Amsterdam to provide information on the projects. The foundation itself keeps an eye on spending

by visiting the projects. Eye Care Foundation supports or runs ophthalmic projects that are integrated as much as possible into national strategies for combating blindness. This means that there is intensive contact with national governments to ensure that the integration is optimal or, when necessary, to advocate an adjustment of the national policy in order to comply with international agreements in this field.

## Communication with volunteers

Volunteers at Eye Care Foundation provide fundraising and communication support at the Amsterdam office. In addition, there are a number of volunteers working as medical or technical advisers for the foundation. Periodic consultations are held with all groups of volunteers. A policy has been established regarding the volunteers, with the intention of clarifying

the working relationship and improving communications with them.

The Project Advisory Committee (PAC) monitors and regulates communications with and between medical volunteers. This committee is a platform for ophthalmologists and other specialists who work for the foundation on a volunteer basis. The committee met a few times in 2016 to jointly advise the Board on the project portfolio and the operational strategy, in cooperation with the project director. This way, specialist eye care knowledge is disseminated throughout the entire organization, not just in the projects themselves.

## Communication with the media

Eye Care Foundation generates as much media attention as possible for the issue of avoidable blindness in developing countries, in order to

raise awareness among the Dutch public. The Foundation also informs current and potential donors of the ways in which Eye Care Foundation employs its available resources, and of the results being achieved or problems being encountered.

### Communication with suppliers

Eye Care Foundation communicates regularly with its suppliers to guarantee an effective balance between services and costs. Where possible, consultations are held with suppliers regarding potential full/partial sponsorship in order to keep costs to a minimum.

### Other communication

Eye Care Foundation is a member of 'Goede Doelen Nederland', the national sector association for fundraising charities. This is necessary in order to stay up-to-date and to be able to contribute to relevant discussions in the charity sector.

Eye Care Foundation collaborates with various other eye care organizations in the Netherlands and abroad on fundraising and project management. In addition, the 'Werkgroep Tropische Oogheelkunde' (Tropical Eye Care Task Force)

facilitates information exchange among Dutch professionals in the field of ophthalmology and eye care in developing countries.

### Complaints

The foundation has an established complaints procedure. The complaints registry is regularly presented to the Board for review.

Eye Care Foundation received ten complaints in 2016, all of which were processed according to the CBF complaint procedures. The complaints were related to transactions that were not carried out, excessive mailing, and the tone used in communication with donors. Eye Care Foundation has taken the comments on board.



## Communication

Eye Care Foundation deeply values good relationships with its stakeholders.

# Outlook

We are proud of our achievements in 2016, both in terms of bottom line and a positive capital balance at the financial year 2016, even though the budget anticipated a small surplus. The balance is largely thanks to having received an exceptional estate.

This financial buffer enables us to allocate more spending to achieving our objectives in the coming years and to invest in developing the organization so that it can realize systematically higher profits. The goal of the latter is to be able to structurally increase long-term spending on projects.

To this end, we have developed programmes to increase the number of donors substantially over the coming years. We are also investing in maintaining strong relationships with existing donors. In practice, we have found that donor relations are vitally important and have a positive effect on future income from estates.

We have also begun strengthening the quality of field offices so that they are better prepared than ever to initiate, implement, monitor and evaluate projects. This enables the Dutch offices to focus on the broader picture, while the local offices focus on the actual implementation of the projects on site.

In 2017, we are raising the bar by budgeting a considerably higher amount for income from own fundraising than what was included in the 2016 budget. These funds will allow us to both launch (more) new projects, and complete existing ones. The process of professionalizing the field offices will continue in 2017. Achieving these ambitions will help us to accomplish more than ever before.

Support from Eye Care Foundation enables projects to be carried out that combat avoidable blindness and visual impairment, while also guaranteeing the projects' effective and ongoing implementation. ECF resources also go towards embedding eye care in the national and/or provincial government care systems in the countries where we are active. This last aim is also a highly integral part of the foundation's work and support.

Collaboration with other national and international organizations remains of key importance to Eye Care Foundation. We are aware that whenever we cooperate with other organizations, we can achieve even more together and have a greater impact on the lives of people in the countries in question.

Combating avoidable blindness and visual impairment in the developing countries where we operate remains a necessity. The demand for our support from these countries continues to exceed our capacity. Our expertise and professional approach is cited by many as one of the strengths of Eye Care Foundation. We are proud of this fact, and will continue to meet the expectations resulting from our reputation.

With your help, we can keep doing this in 2017 and the years to come.

# Budget 2017 x € 1.000

	Budgeted 2017	Actual 2016	Budgeted 2016
<b>Income</b>			
Own fundraising	2.223	3.546	1.677
Third-party campaigns	2	2	3
Income from interest	11	13	11
<b>Total income</b>	<b>2.236</b>	<b>3.561</b>	<b>1.691</b>
<b>Costs</b>			
Spending on			
Objectives projects	1.291	1.135	973
Education	<u>554</u>	<u>439</u>	<u>329</u>
	1.845	1.574	1.302
Acquisition of income			
Own fundraising	484	334	294
Management and Administration Costs of M&A	<u>96</u>	<u>97</u>	<u>85</u>
Total costs	2.425	2.005	1.681
<b>Results</b>	<b>-189</b>	<b>1556</b>	<b>10</b>

Your donations enable us to provide good eye care to the poorest patients. Worldwide there are still 285 million people with visual disabilities. As much as 90% of this group lives in a developing country. Eye Care Foundation is dedicated to providing effective and accessible eye care to people in the project countries who either cannot reach or pay for medical care. Your support makes this possible.





# Projects

Eye Care Foundation is a member of the International Agency for the Prevention of Blindness (IAPB). IAPB is an alliance of international non-governmental organizations active in the field of ophthalmology in developing countries. The common goal of these groups is to prevent avoidable blindness and visual impairment, and to make eye care accessible to everyone by the year 2020. The World Health Organization (WHO), in consultation with the IAPB, has developed a strategy to meet this goal as well as a global campaign: Vision 2020. Eye Care Foundation follows the guidelines of the Vision 2020 strategic plan and sets its own additional priorities.

Eye Care Foundation has chosen to focus on three regions: the Himalayan region, the Mekong region and East Africa. Our work in these transnational regions takes place in five countries. The emphasis in the project countries is chiefly on strengthening primary eye care systems.

In addition, Eye Care Foundation is committed to strengthening and expanding the capacity of national and provincial ophthalmic advisory and policy bodies, as well as educational institutes for ophthalmic and support staff.

Eye Care Foundation also focuses on improving infrastructure. This requires attention to adequate facilities and appropriate instruments and equipment that make optimum eye care possible.

Finally, there is attention for awareness and

influencing policy. In villages, we focus on raising awareness among the local community, while we direct our policy influencing efforts at government officials. This work occurs at the provincial and national levels. Embedding eye care within health care services is one of the most important priorities for the future.

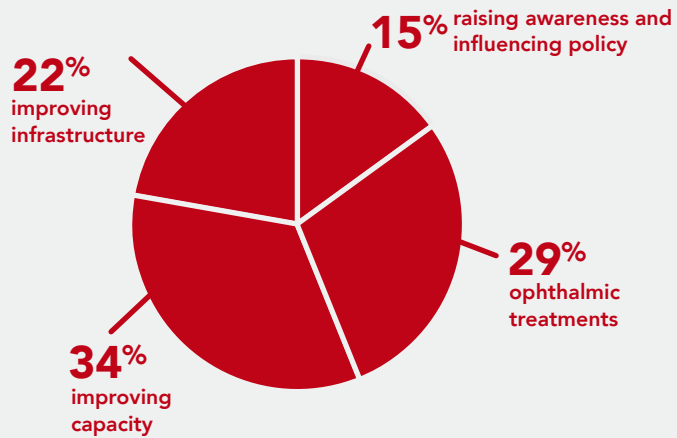
Conducting national studies into the scope and nature of eye conditions is one aspect of influencing policy. The data we collect, which demonstrates the effectiveness of eye care, is crucial information for policy makers.

### Raising awareness and influencing policy

In the majority of project countries, attention and effort is already being devoted to policy

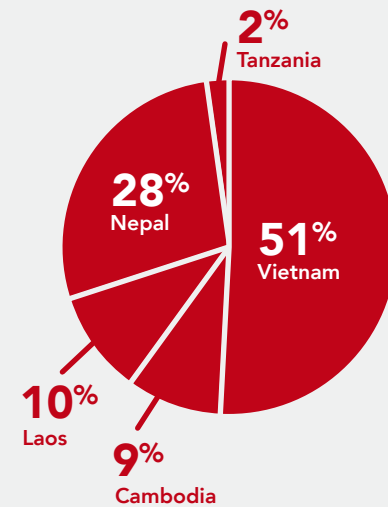
influencing. Population screening is conducted to provide an overview of the scale of vision problems, which is then presented to governments along with achieved results in order to persuade them to take greater responsibility.

In 2016, population screening commissioned by Eye Care Foundation was conducted in Morogoro Province, Tanzania. This was followed up by a meeting with policy makers during which the outcomes of the screening were presented and the future was discussed. At the same time, in most project countries, attention is also being given to education and raising awareness among the local population. This work goes hand in hand with interventions aimed at prevention or changing behaviours related to eye conditions.



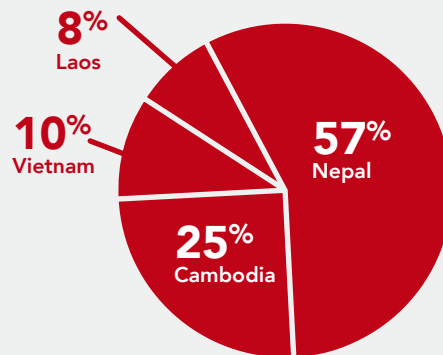
### Allocation of resources

Of all resources used (direct project costs) in the project countries receiving Eye Care Foundation support, 34% went to improving capacity, 29% was spent on ophthalmic treatments, 22% on to improving infrastructure, and 15% went to raising awareness and influencing policy.



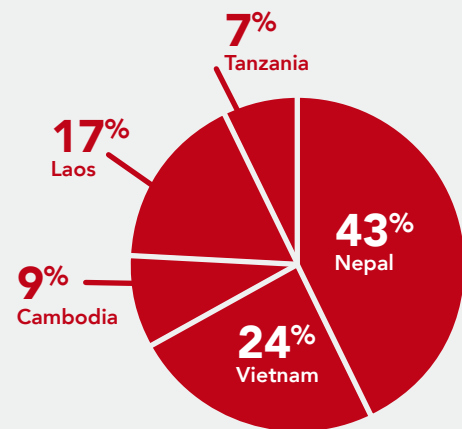
### Ophthalmic treatment

57% of ophthalmic treatment expenditure was spent in Nepal. The corresponding amounts in Cambodia, Laos and Vietnam were 25%, 10% and 8% respectively.



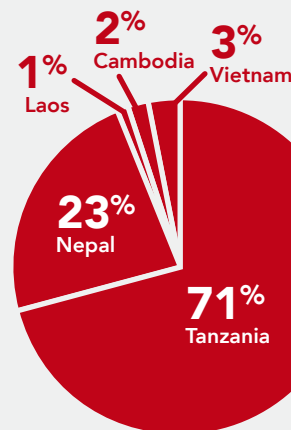
### Infrastructural support

51% of total resources spent went to the programme in Vietnam. This expenditure went mostly to purchasing refraction equipment. Nepal accounted for 28%, Laos for 10%, Cambodia for 9%, and Tanzania for 2%.



### Capacity building

Proportionally, most capacity building (43%) took place in Nepal. Spending in Vietnam amounted to 24%, while the training of ophthalmologists accounted for 17% of resources spent in Laos, 9% in Cambodia, and 7% in Tanzania.



### Raising awareness and influencing policy

Spending on raising awareness and policy influencing was divided as follows: 71% in Tanzania, 23% in Nepal, 3% in Vietnam, 2% in Cambodia and 1% in Laos.



# Nepal

## Support of Eye Care Foundation

- The local Eye Care Foundation office in Kathmandu supervises project partners in Nepal in developing and implementing project plans
- Establishing and supporting two eye hospitals: the Himalaya Eye Hospital and the Mechi Eye Hospital
- Support for eye care programmes in Gandaki, Dhaulagiri and Mechi, as well as three districts in the Karnali zone
- Support for a national education and awareness programme
- Support for earthquake recovery and reconstruction programme
- Introduction of quality control for cataract surgery in HEH and MEH, in cooperation with the European Society of Cataract and Refractive Surgeons
- The projects can rely on input from an Eye Care Foundation medical adviser

## Activities Eye Care Foundation

- Construction of a new wing to accommodate private patients in MEH and a restaurant for staff and patients
- Replacement and acquisition of equipment and instruments
- Support for eye care facilities in remote areas;
- Holding eye camps
- Eye screening for schoolchildren
- Training of ophthalmic, healthcare and support staff
- Support for national eye care education programme
- Establishing primary eye care centre in Jhapa
- Attending international scientific conference
- Restoring six HEH employees homes, which were damaged by the earthquake
- Allocating relief resources to earthquake victims and the reconstruction of five toilet blocks at different schools in Gorkha

## Partners of Eye Care Foundation

- Nepal Netra Jyoti Sangh (NNJS)
- Himalaya Eye Hospital (HEH) in Pokhara
- Mechi Eye Hospital (MEH) in Birtamod

## Strong points in the projects

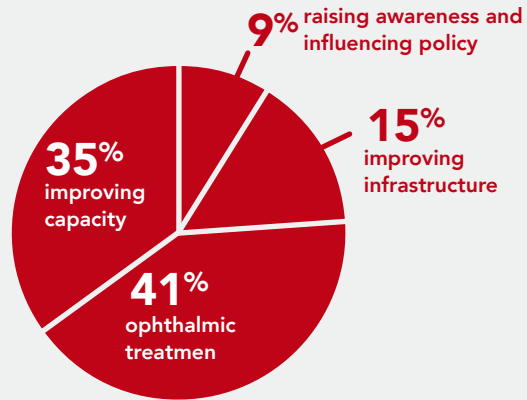
- The HEH is operationally independent. It has begun expanding its facilities, for which own funds are being used
- The MEH is investing considerably in training, equipment and expanding specializations and facilities
- Eye care programmes in remote areas are under the supervision of well-equipped and well-functioning hospitals
- Hospitals have well-trained and specialized employees and provide specialized healthcare

## Weak points in the projects

- The executive boards of both hospitals are inexperienced
- Developing a long-term policy for hospitals is a challenge
- Eye care programmes in remote areas are expensive and time-consuming
- Attracting and retaining highly qualified staff in remote areas is a challenge
- Advocacy and lobbying to the national government are time-consuming



## Allocation of resources



## Future plans

MEH is opening new primary eye care centres in Rajghad and Pashupatinagar. MEH is already able to cover its own operational costs, equipment and instruments purchasing, as well as the training and education of its own staff. Eye Care Foundation has a seat on the executive board of the hospital and will use its influence to strengthen the day-to-day management.

The HEH programme aims to improve eye care and eye care facilities in the three zones within the hospital's catchment area. The primary eye care centres in the districts Baglung and Gorkha will be upgraded to surgical centres (secondary care centres). The operating theatres in Kalikot and Jumla, which are currently still made of mud

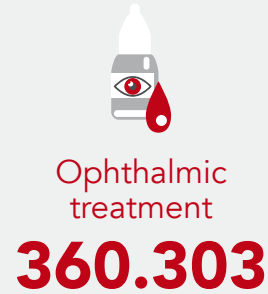
and cement, will be replaced with different material in order to meet the guidelines developed by the Ministry of Health.

The monitoring registry EUREQUO, introduced last year in both hospitals, will remain in use in order to improve surgical quality. After a period of five years, the knowledge, attitudes and practice (KAP) survey for eye care will be repeated. This way, the effectiveness of the last five years' intervention can be assessed.

Eye Care Foundation will continue to encourage the government to intensify its commitment to eye care in Nepal. With our NGO partners (eye-related and otherwise), we are taking the necessary and relevant steps.



## Results



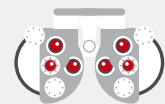
Glasses fitted

**542**



Eye screening schoolchildren

**16.783**



Training ophthalmic staff

**69**



Training support staff

**1.691**



## Education is essential

In 2013, a KAP survey was conducted to discover how much people knew about eye care and how they use that knowledge. The results showed that 47.1% of the population had basic knowledge about eye care and knew something about preventive measures. Only 47% of the population was familiar with the term cataracts and only 32% knew that cataracts could be treated and where that was possible.

The National Eye Health Education Program was initiated to improve existing basic knowledge about eye care, with financial support from Eye Care Foundation and NNJS. Basic eye care training was provided to 891 healthcare workers. Of this group, 326 were female village healthcare workers, 280 were members of the so-called Mothers Group, and 285 were pharmacists. People with smart phones received a short text with information about eye care, the recommendation to have their eyes examined regularly, and the address of the local hospital. In 2017, the results of this programme will be assessed. This information will be used to develop new educational programmes.



# Vietnam

## Support by Eye Care Foundation

- Eye care is being bolstered in five provinces in the Mekong delta, particularly the treatment of refractive disorder;
- We are setting up and developing Vision Centres in districts. These Vision Centres work according to a socio-entrepreneurial model, in which profits are invested in subsidizing eye care and glasses for the poorest patients
- A tertiary eye hospital is being supported by strengthening its optometry capacity
- The local Eye Care Foundation office in Ho Chi Minh City guides project partners in the development and implementation of project plans
- The local Eye Care Foundation office oversees the exchange and development of good practices
- The projects can rely on input from an Eye Care Foundation medical adviser
- Eye Care Foundation is represented in the task force of all Vietnamese NGOs active in the field of eye care. The task force collaborates closely with the national committee for combating blindness



## Activities

### Eye Care Foundation

- Five provinces in the Mekong delta have started setting up comprehensive facilities for the treatment of refractive disorders. Refractionists and school nurses have been trained, and instruments and glasses donated for refractive disorders. Children and senior citizens have been tested for eye disorders during outreach activities. Vision Centres have been opened in all provinces. Experiences are being monitored and shared
- Supervisors have been selected to support the refractionists
- Various training programmes have been held, including refractionist refresher courses and supervisor training. A strength-weakness analysis of the current set-up of the Vision Centres was conducted and findings were exchanged with the aim of further reinforcing strengths and finding ways to fix the weaknesses
- In 2015, two employees of the Vietnam National Institute of Ophthalmology in Hanoi and two employees of the Ho Chi Minh Eye Hospital completed a four-year degree in optometry in Malaysia, and have started work.

Four others are currently taking the four-year optometry programme in Malaysia, with good results

- Population research aimed at evaluating the extent of eye problems (RAAB survey) has been conducted throughout the country, ordered by the IAPB, including two provinces where Eye Care Foundation runs projects. This document was accepted and recognized by the government in 2016

### Partners of Eye Care Foundation

- Vietnam National Institute of Ophthalmology
- Ho Chi Minh City Eye Hospital
- Provincial health care authorities in:
  - Binh Duong
  - Ca Mau
  - Dong Thap
  - Soc Trang
  - Vinh Long

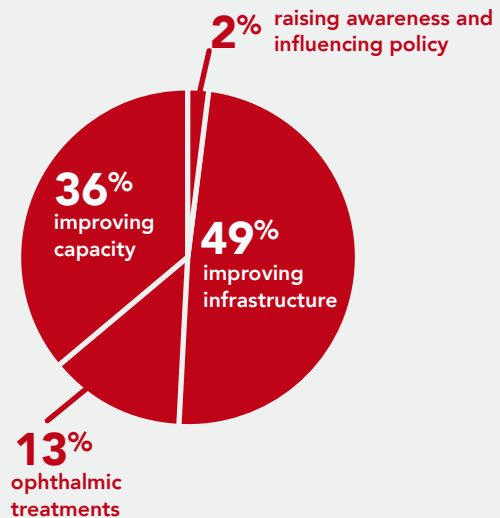
## Strong points in the projects

- Utilizing and strengthening existing medical and social infrastructure. For example, using the local women's movement to raise awareness
- The first four optometry students have graduated and are now working as associate lecturers in the optometry programme and in tertiary eye hospitals in Hanoi and Ho Chi Minh City. The other four optometry students are performing well
- There is interest in and enthusiasm for setting up facilities for the treatment of refractive disorders at provincial and district level
- The motivation to develop business plans for Vision Centres is high
- The central government has established a strategy for preventing and treating blindness. This is a good starting point for further talks on associated activities and funds

## Weak points in the projects

- Quantity of eye care seems to be more important to the government than quality, leading to a lack of attention to following up both the results of cataract surgeries and the use of glasses for refractive disorders
- Local/national government is only willing to take over activities and finance them once they have proven their worth
- In most provinces, healthcare providers do not offer comprehensive eye care
- Ever since Eye Care Foundation ceased funding cataract surgeries in remote areas, there have been signs that local partners are less motivated to conduct outreach activities. This is because these activities are not covered by insurance

## Allocation of resources



## Future plans

In 2017, we will continue to focus on uncorrected refraction in five provinces to improve the vision of poor school children and the elderly. We will target capacity strengthening, infrastructure, research and the influencing of policy.

The key objectives for the coming year are: making Vision Centres accessible and affordable so that local populations can easily avail of primary eye care; eye screening of 75% of all schoolchildren and senior citizens, providing free or subsidized glasses, and referring people to specialized eye hospitals

for timely and appropriate treatment; educating local healthcare workers and teachers about basic eye screening, as well as developing a network and increasing awareness among members of local government and the community.

These objectives help Eye Care Foundation to contribute to efficient, effective and adequate eye care infrastructure. Particularly in the area of awareness, we will be exploring options for effectively using modern communication techniques and smart phones.



To mark World Sight Day, eye screenings were carried out for the elderly and people were fitted with glasses. Secondary school students undergo eye screenings. Poor children with poor vision receive free glasses.

## Results



Fitting glasses

2.226



Training optometrists

4



Training support staff

54

## Eye screening helps young and old

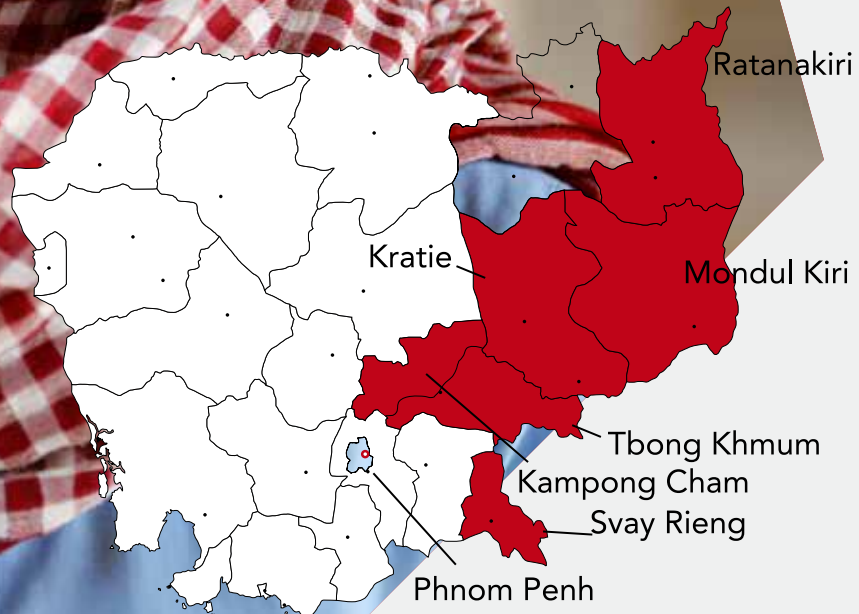
The third year of the project phase of the Binh Duong Province eye care programme was completed. In the past year we were able to achieve the success we were aiming for, due in part to the positive cooperation and support of the Binh Duong Social Disease Prevention Centre. In six districts, poor children and senior citizens received eye screening; where necessary, they were fitted for glasses. More than 600 children and elderly people can now return to school or work. Following this modest success, we are looking forward to expanding our activities in Binh Duong.



# Cambodia

## Support by Eye Care Foundation

- The local Eye Care Foundation office in Phnom Penh is assisting project partners in Cambodia with the development and implementation of project plans
- The projects can rely on input from an Eye Care Foundation medical adviser
- Six Cambodian provinces receive support for strengthening their eye care systems
- Eye Care Foundation supports the national Ophthalmology Training course at the University of Health Sciences in Phnom Penh, in cooperation with the Fred Hollows Foundation (Australia)
- Eye Care Foundation is represented in the consultative body for all Cambodian NGOs active in the field of eye care, which cooperates closely with the national committee for the prevention of blindness



## Activities Eye Care Foundation

- Donation of instruments and equipment
- Carrying out eye operations to prevent or treat blindness
- Organization of eye camps to reach people in remote areas
- Active participation of ophthalmologists in training in Cambodia
- Subspecialization training in eye socket surgery for Cambodian ophthalmologist at AMC Amsterdam
- Basic eye care training programmes for health workers and village volunteers
- Additional training and refresher courses for ophthalmologists and eye care staff
- Contribute to raising local population's awareness of eye care;
- Participation in national eye care task force

## Partners of Eye Care Foundation

- The National Committee for combating avoidable blindness
- The Khmer Russian Friendship Hospital in Phnom Penh
- The University of Health Science in Phnom Penh
- Provincial health care authorities in:  
Kratie  
Ratanakiri  
Mondulkiri  
Tbong Khmum  
Kampong Cham  
Svay Rieng

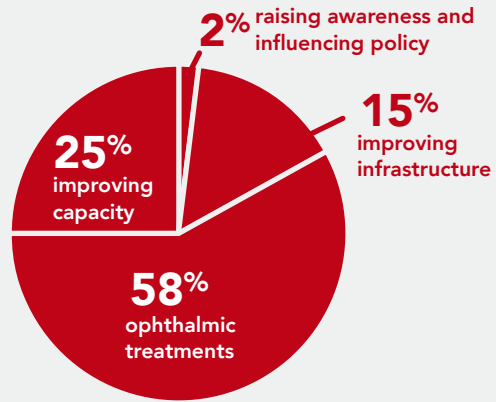
## Strong points in the projects

- Motivation and efforts of partners to provide aid to less fortunate members of society
- Searching for new ways to reach and to help the less fortunate
- Eye Care Foundation cooperates closely with other NGOs to secure and optimize support for project partners

## Weak points in the projects

- The projects are largely dependent on the support of Eye Care Foundation
- Direction from the national eye care committee is limited
- There is ongoing tension between private and public eye care services

## Allocation of resources



## Future plans

In 2017 the eye clinic in Kratie will be renovated. The clinic, which opened in 2001, receives a new coat of paint and roof reinforcements. In Ratanakiri, Eye Care Foundation is responding to the need of the hospital. An eye clinic will be opened there in autumn 2017.

The second phase of the training programme for ophthalmologists was completed in 2016. The third and final phase begins in 2017, and is geared towards phasing out support from NGOs. The University of Health Sciences,

Faculty of Medicine, in Phnom Penh, in co-operation with the Ministry of Health, will be responsible for heading up this project. During the last phase, Eye Care Foundation will focus on training Cambodian specialists who can take responsibility for instructing ophthalmologists in training.

Additionally, a new country plan is in development, in which the embedding of eye care in healthcare will be given higher priority.



## Results



Cataract surgeries

**1.062**



Fitting glasses

**68**



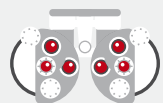
Other eye surgeries

**545**



Training ophthalmologists

**5**



Training ophthalmic staff

**2**



Eye screening school children

**1.681**

## Extra training abroad

Cambodian ophthalmologist Pang Samorn completed seven months of training under Prof. Mourits of AMC Amsterdam. In Amsterdam, he specialized in eye socket surgery, a specialization that had never been practised in Cambodia. Now he can instruct ophthalmologists in training in eye socket disorders, and he can treat patients with carcinomas and other eye socket abnormalities. He also took a course on pathology in the Pathology department of Erasmus MC, Rotterdam one day a week in order to expand his knowledge of this subject. In 2017, both of Samorn's teachers will visit Cambodia to provide further instruction in the day-to-day setting.





# Laos

## Support by Eye Care Foundation

- A Laotian part-time employee oversees projects in the provinces supported by Eye Care Foundation and the national eye care centre
- Support for six ophthalmologists in training
- Donation of instruments and equipment
- Eye Care Foundation's medical adviser provides on-the-job training of ophthalmologists





## Activities Eye Care Foundation

- The quality of cataract surgery has improved, which is bringing more people to the hospital, especially in Xieng Khouang, for screening and treatment. The number of patients rose from 3,900 in 2013 to 10,200 patients in 2016
- Ophthalmic nurses received more training in eye examinations, basic treatment of eye conditions, diagnosing cataracts and making referrals. They apply the knowledge they acquired in practice, and patient files are being maintained and checked more effectively. They are also helping to find more potential patients
- Hospitals have acquired instruments and equipment for eye operations
- The Laotian ophthalmologists received hands-on training and advice from the medical adviser from the Netherlands, which increased their knowledge and understanding of the extent to which cataracts can be treated. This helps to improve the overall results, which encourages patients to seek treatment
- A pilot study was carried out in a rural community in Xieng Khouang. 500 schoolchildren between the ages of 11 and 14 received eye

screening. The knowledge acquired in the pilot will be used to repeat this type of research in future

- In villages in two provinces, 227 cataract operations were performed, while 127 were carried out within the region. Eye Care Foundation had more consultation with partner organizations, which improved the quality of our activities. The project coordinator who was hired in 2016 facilitated the consultations and oversaw project implementation

## Partners of Eye Care Foundation

- The National Ophthalmology Centre in Vientiane (NOC)
- The provincial health care services of Xieng Khouang province
- The provincial healthcare services in Houaphan province
- The provincial healthcare services in Xaysomboun province

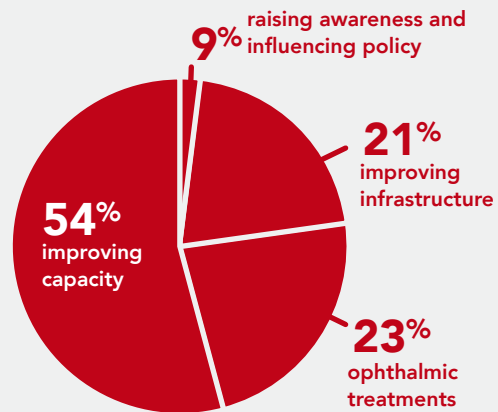
## Strong points in the projects

- The projects are executed with enthusiasm by ophthalmologists in the provinces of Xiangkhouang and Houaphan
- Good collaboration between Eye Care Foundation and the management of the provincial hospitals and ophthalmologists
- Increased quality of care after donation of equipment and instruments, as well as on-the-job training from Eye Care Foundation medical adviser

## Weak points in the projects

- The quality of eye care remains a concern
- The infrastructure of eye care needs further strengthening
- Ophthalmologists have many different duties, which compromises eye care
- Very few eye patients from rural areas seek out cataract surgery, partly because they do not know about the possibilities eye care can offer. Education remains a point of focus
- The ophthalmologists educated in Laos need to improve their English. Eye Care Foundation is supporting them in taking English lessons. Students who speak and write better English can apply this knowledge on their course, and it also boosts their self-esteem

## Allocation of resources



## Future plans

- Three students are continuing their ophthalmology training. In 2017, three new students will start the course: one from Xaysamboun, one from Xieng Khouang and one from Houaphan
- Six students are being trained as ophthalmic nurses: two for Xieng Khouang, two for Houaphan and two for Xaysomboun;
- The populations of Xieng Khouang and Houaphan are being informed about eye care through radio and TV advertisements and posters. Use is being made of material developed by the NOC
- A training course for ophthalmic nurses and healthcare workers is receiving support. This course focuses on how to help find patients who need cataract operations. Identifying patients in one of the challenges we face in Laos because people do not visit the hospital on their own initiative
- Support from NOC, Xieng Khouang and Houaphan to organize World Sight Day
- Supporting NOC to convene meetings of the eye care task force. These meetings contribute to strengthening the vision sector in Laos by bringing together the various stakeholders, including government agencies and NGOs, so that they can share their experiences
- Supporting an ophthalmic nurse to complete a training course in Thailand
- Organizing the annual Eye Care Foundation workshop. All partners are invited to this event so they can share their successes and experiences, discuss medical subjects and combine forces to find solutions for common obstacles in the vision sector
- Supporting cataract surgery in hospitals and during field visits. A number of cataract operations are scheduled in Houaphan (200) and Xieng Khouang (350)
- Supporting pterygium (conjunctiva overgrowth of the cornea) removal surgery. 20 operations in Xieng Khouang and 50 operations in Houaphan
- Supplying medical equipment to the hospitals in Xieng Khouang and Houaphan

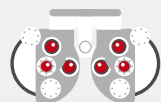


## Results



Glasses fitted

**112**



Training ophthalmic staff

**8**



### Infrastructural support

In addition to the purchase of equipment and instruments, financial resources were used to construct a new eye clinic in Xieng Khouang.

## More patients can be helped

An eye clinic was built in Xieng Khouang province with the help of Eye Care Foundation. Previously, the conditions were make-shift. There was no separate operating theatre for eye patients and no recovery ward for patients who had had operations. In 2013 only 3,900 patients could be helped, but in 2016, this number rose to 20,200. The eye clinic is now fully operational and staffed with good employees. Every patient receives the attention that he or she deserves.





# Tanzania

## Support by Eye Care Foundation

- Educational support for the training of ophthalmologists in Moshi;
- Support for the Morogoro eye clinic; training of ophthalmologists; technical support for the eye team;
- A population based survey concerning the scope and nature of eye conditions (RAAB survey);
- Organizing of a workshop to discuss RAAB survey findings and the willingness of local government to participate in a project still to be developed.

Moshi

Kilimanjaro

Dodoma

Dar es Salaam

Morogoro

## Activities Eye Care Foundation

- Two Dutch ophthalmologists gave lectures and hands-on training at the ophthalmology training centre
- Donation of instruments and equipment;
- A local doctor is specializing in ophthalmology
- Dutch team of ophthalmologists and a surgical assistant provided technical support to local team
- RAAB survey carried out in the Morogoro Region
- Workshop with local planners and policy makers
- Cooperation initiated with Sight Savers International, local Lions Club and other donors in the Morogoro Region

## Partners of Eye Care Foundation

- Kilimanjaro Christian Medical Centre; Eye Health Department, Moshi
- Morogoro regional hospital
- Morogoro regional health department

## Strong points in the projects

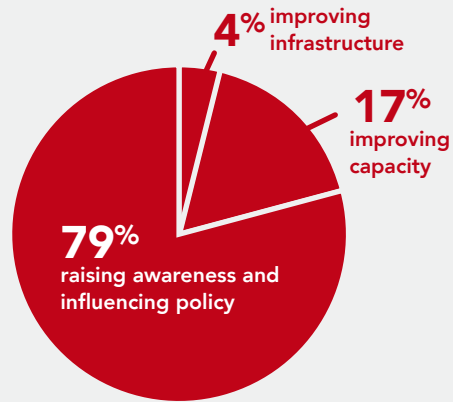
- Well-educated foreign teachers at the ophthalmology training centre in Moshi attract students from neighbouring countries
- The presence of sub-specialists means that treatments for unusual eye problems are also available
- Regional government is highly prepared to support eye care in the Morogoro Region

## Weak points in the project

- Communication at a distance is difficult
- Electrical connection problems with regards to instruments like sterilisers



## Allocation of resources



## Future plans

In 2017, the two Dutch trainers of the first-year ophthalmologists in training will travel to Moshi for the final time. Because of the great need for equipment repairs, Eye Care Foundation and Medical Workshop Optronica are sending a technician to repair the equipment as well as instruct a hospital technician in how to carry out these maintenance and repair activities.

With our partner organization Sight Savers International, we have taken stock of the demand in the Morogoro Region. After drawing up a project proposal, Eye Care Foundation will work to strengthen eye care in this area.



## Results



Training  
ophthalmologist

1

### Infrastructure

Instruments and  
textbooks for  
students and the  
ophthalmology  
department



Training  
ophthalmologists

8

### Awareness

A RAAB survey by  
Eye Care Foundation  
was conducted in  
Morogoro Province.  
This was followed up  
by a meeting with  
policy makers during  
which the survey out-  
comes were presented  
and the future was  
discussed

## Awareness is important

The population based survey that took place in the Morogoro Region brought the researchers to hard-to-reach places where people had never even heard of eye care. Following the study and the publicity for ophthalmology, the eye team noted an increase in the number of patients. The survey showed that in addition to cataracts, glaucoma was also common. More men than women know how to seek treatment. But for both groups, the costs of surgery represent an obstacle to actually undergoing treatment. In a meeting with policy makers and planners, the results of the survey were discussed and plans were made for the future.







# **Fundraising and Communication**

# Fundraising and Communication

## Fundraising

The aim of Eye Care Foundation's fundraising activities is to raise the funds necessary to implement the projects. The projects contribute to realizing Eye Care Foundation's objective. The annual plan determines which activities will be carried out to acquire these funds and outlines the budgeted costs that are associated with them.

## Private donors

Despite intense competition on the charity market, Eye Care Foundation donors are very loyal. The fact that only a small number of donors cancel their automatic donations illustrates their loyalty, as does the high response rate and average donation from house mailings. Attracting more new donors and keeping existing donors was one of the top priorities for fundraising in 2016. In order to realize a substantial increase in private fundraising, this year we launched a multi-year plan geared at growing the number of active donors by 50%, to 30,000 by 2020. The results of sending out the multi-year plan's first round of extra direct mailings and inserts were positive during the last three months of 2016. These activities will continue throughout 2017. By leaving a bequest to Eye Care Foundation in

their will, a number of loyal donors also opt to let their commitment to combating blindness and visual impairment live on after their death. Estates represent a growing source of income for Eye Care Foundation. We began to increase our efforts to target wealthy donors in 2016. With that in mind, the foundation joined the national campaign to increase awareness about charitable bequests. This will kick off in late 2017.

## Institutional market

Even though the institutional market is not a growth market, for project financing it was still an important source of income in 2016. Over the years, we have developed a long-standing relationship with most institutional donors. The number of institutional donors in the Netherlands has declines slightly in recent years, but this has not yet influenced our income. In 2016, we succeeded in establishing new contacts and received funding from new institutional donors.

## Corporate market

The additional effort we have invested over the past few years in the corporate market has brought us a number of new propositions. Also, the grand opening of our multi-year cooperation with Royal De Heus was held in their new

factory in Vinh Long, Vietnam in April 2016. Local fundraising in project country Vietnam has been professionalized accordingly. A local fundraising plan was drawn up to carefully gather information about the potential of this new market. The aim was to get more local companies involved with Eye Care Foundation's objective. The initial results were modest but were enough to support the fundraising activities of Eye Care Foundation office in Ho Chi Minh City.

## Third-party campaigns

Eye Care Foundation received support in 2016 from several small and large campaigns carried out by third parties. The fruits of their labour benefited the execution of the projects. One example of a third-party initiative was an art exhibition of the work of sculptors Evert ten Hartog and Frank Stoopman, organized by ABN AMRO MeesPierson Rotterdam on 30 September and 1 October for the bank's private banking clientèle. The artists donated part of their sales to Eye Care Foundation. The proceeds went to building a new eye clinic in Ratanakiri, Cambodia.

## Communications

The goal of Eye Care Foundation's communication activities remains unchanged: teaching

people in the Netherlands that a thing they generally take for granted - good eye care - is either unavailable or inaccessible for many people in the world.

The ultimate goal of our communication activities is to help boost income from the different target groups. We do this through increasing the brand awareness of Eye Care Foundation, maintaining and intensifying the involvement of existing donors, facilitating donations and acquiring new donors.

### The Dutch public

Eye Care Foundation donors receive a maximum of three mailings and two newsletters every year. Each mailing contains a request for donations and a story of an eye care patient from one of the project countries. The newsletter focuses on the eye care projects in the different project countries. News, patient stories and newsletters are shared on the website and on social media.

In April 2016, Eye Care Foundation sent journalist Piet Arp and photographer Ringel Goslinga to Nepal. They visited the areas affected by the 2015 earthquake which are within Eye Care Foundation's area of operation. They reported

on the state of affairs there one year after the disaster, and on how aid from the Eye Care Foundation Nepal Emergency Relief Fund is being used.

In November, photographer Mariëlle van Uiter and film-maker Cassandra Vugts travelled to Cambodia. They captured visual material for Eye Care Foundation during an eye camp. This was used to make a new TV and radio advertisement that will be used from 2017.

### The international public

After the completion of the renewed Dutch-language website of Eye Care Foundation, work has started on renewing the English-language website as well. The website can then be used as a strategic tool in all fundraising campaigns, also in the project countries. Additionally, most project countries already have their own Facebook page where they post news and updates.



Raising funds by participating in a running race, selling homemade jam or donating a wedding gift are some of the ways people can help eye patients get back their sight. The support our donors give is unique.



# **Accountability Report**

# Accountability Report

## I Governance and supervision

"Within the institution, the role of 'supervision' (adoption or approval of plans and the critical monitoring of the organization and its results) must be clearly segregated from that of 'management', or 'implementation'."

### Internal supervision

The Board of Eye Care Foundation is primarily a supervisory body. A significant portion of the management duties have been delegated to an Executive Director, who manages the foundation's implementing organization and performs his duties according to a set of management regulations. The Board supervises the Executive Director, approves the policies, annual plans and budgets that are prepared by the management, and monitors their implementation by means of quarterly reports.

### Composition of the board

The Board is assembled on the basis of the following desired knowledge profiles:

- Medical/ophthalmic expertise,
- HRM expertise,
- Financial/administrative expertise, and
- Fundraising/marketing expertise.

In daily life, Ms. M. Septer, the foundation's treasurer, works as an accountant at PricewaterhouseCoopers (PwC). Ms. L.A. Hummel, executive Board member responsible for fundraising, works at Amref Flying Doctors Nederland as head of fundraising and partnerships. The other work of the remaining Board members results in no conflicts of interest.

Members of the Board are appointed for one term of four years with a maximum of one reappointment. There is a rotation schedule, which ensures a gradual turnover of Board members. Recently, Mr. R.W.M. van Rooijen and Mr. C. van Dijk stepped down from the Board after their board membership reached the maximum number of permitted years. Mr. A.M. van Praag and Ms. L.A. Hummel took their places on the executive Board.

### Conflicts of interest

The Executive Director, Board members and committees with management or supervisory duties operate in an independent and unrestricted manner. The form or appearance of any conflicts of interest that may affect the work of the Executive Director, the Board or the organi-

zation's committee members is strictly avoided, and monitored by the Board.

The Executive Director or any Board/committee member must notify the chairman of the Board of any existing or potential conflict of interest, and provide all relevant information if, and as soon as, any such conflict is suspected. The Board will decide whether there is in fact any conflict of interests, and how to address it.

The Executive Director or any Board/committee member with a conflict of interests of material significance to the organization and/or the person in question shall not take part in the relevant decision-making process.

Any person with a conflict of interests may not represent Eye Care Foundation in matters affected by the conflict of interests.

Conflicts of interest are defined in Article 4 of the Articles of Association, and there are regulations in place that describe how they are to be addressed.

## Evaluation

### 4a. Evaluation of the performance of the Board

The Board evaluates its own performance annually.

### 4b. Evaluation of the performance of the Executive Director

The Executive Director's performance is evaluated on a yearly basis by way of a performance and assessment interview conducted by the chairman of the Board and a Board member charged with HR duties.

## II Allocation of resources

### Guiding objectives

The foundation's goal is twofold: firstly, the preventive and curative treatment of blindness and visual impairment in the broadest sense of the word, primarily in developing countries; and secondly, raising awareness of these issues in Dutch society.

In 2016, Eye Care Foundation drew up the 2016-2020 long-term policy plan that functions as the basis for the annual plans created for every year of the policy period. The policy plan details the guiding objectives relating to project

support, fundraising, education/raising awareness, finances and HRM. Particular details are further elaborated upon per year in the annual plans.

### Planning, monitoring and evaluation

Progress reports and final reports on projects are based on these procedures. The management was informed of the progress of current projects and of the effectiveness of the use of budgeted resources on a quarterly basis.

### Adaptations based on evaluations

Activities for projects in which Eye Care Foundation is one of the implementing bodies are steered directly by the responsible programme manager, based on project evaluations. Wherever Eye Care Foundation entrusts the implementation of projects to other bodies (acting only as project backer), continued financing is dependent on periodic project evaluations and reports. The results of project evaluations are taken on board in the development of future projects. Eye Care Foundation plays an active part in the development of new projects, and weighs up its own input with both the input of those directly involved in project implementation, and with the results achieved based on the outcome of project evaluations.



"The Institution must work continuously on the optimum allocation of resources, so that objectives can be achieved in an effective and targeted manner."





### III Relationships with stakeholders

Eye Care Foundation places great value on maintaining good relationships with stakeholders. The key stakeholder groups defined by the foundation, to which specific communication is directed, are listed briefly below.

#### Communication with donors

Eye Care Foundation publishes the newsletter several times a year to inform donors of the foundation's work. Donors also receive information on specific projects.

#### Communication with subsidized organizations

Eye Care Foundation maintains functional and sincere, but professional relations with the companies it subsidizes.

Amsterdam, 19 June 2017

#### Communication with volunteers

Volunteers at Eye Care Foundation work actively in the fields of fundraising, office support and also as project medical advisers. Periodic consultations are held with all groups of volunteers. Medical advisers were consulted in 2016 on project content.

#### Communication with staff

Eye Care Foundation employees participate actively in, and make concrete contributions to, policy formation in various areas.



"The institution strives to optimize relationships with both internal and external stakeholders, through focused attention on communication and the adoption and incorporation of wishes, questions and objections."

#### Board

A.M. van Praag

H.M. Kemme

M. Septer

R.M.J. van den Brink

L.A. Hummel

#### Director

R. Wiedijk



Handwritten text and tables on documents held by the woman on the right. The text is in Indonesian and includes a title: "Daftar nama Instansi/Instansi (Perusahaan) yang telah dikunjungi". Below the title is a table with columns for "No. Urut", "Nama Instansi/Instansi (Perusahaan)", "Alamat", "No. Telp/Fax", "No. Email", "No. HP", "No. RT/RW", "No. Desa/Kelurahan", "No. Kecamatan", "No. Kabupaten/Kota", "No. Provinsi", "No. Negara", and "No. Lain-lain". The table is mostly empty, with only a few entries visible. There is also a section for "No. Urut" and "Nama Instansi/Instansi (Perusahaan)".

# Financiale statements

# Balance Sheet as per 31 December 2016

*In euros*

after appropriation of result		31 december 2016		31 december 2015	
<b>Assets</b>					
Tangible Fixed Assets	A		103.096		56.918
Stocks	B	0		0	
Receivables	C	71.580		131.393	
Cash	D	<u>3.108.177</u>		<u>1.439.505</u>	
			<u>3.179.757</u>		<u>1.570.898</u>
<b>Total</b>			<b>3.282.853</b>		<b>1.627.816</b>
<b>Liabilities</b>					
Reserves and Funds					
Reserves	E				
continuity reserve		1.088.109		842.136	
earmarked reserves		<u>1.615.699</u>		<u>342.508</u>	
			2.703.808		1.184.644
Funds	F				
earmarked project funds		314.094		268.770	
named funds		<u>30.476</u>		<u>39.237</u>	
			<u>344.570</u>		<u>308.007</u>
			<b>3.048.378</b>		<b>1.492.651</b>
Short term liabilities	G		<u>234.475</u>		<u>135.165</u>
<b>Total</b>			<b>3.282.853</b>		<b>1.627.816</b>

# Statement of income and expenses 2016

In euros

		Actual 2016	Budget 2016	Actual 2015
<b>Income</b>				
Income from own fundraising	H	3.545.811	1.677.360	1.619.686
Income from third-party campaigns	I	1.760	2.500	1.971
Income from investments	J	13.252	11.000	12.035
<b>Total income</b>		<b>3.560.823</b>	<b>1.690.860</b>	<b>1.633.692</b>
<b>Expenses</b>				
Expenses on objectives	K			
Projects, structural support	K1	1.134.264	972.596	859.568
Information and awareness raising	K2	439.421	328.703	300.918
		1.573.685	1.301.299	1.160.486
Fundraising	L			
Expenses own fundraising	L1	333.941	293.597	297.696
		333.941	293.597	297.696
Management and administration	M			
Expenses management and administration		97.470	85.496	94.475
<b>Total expenses</b>		<b>2.005.096</b>	<b>1.680.392</b>	<b>1.552.657</b>
Result		1.555.727	10.468	81.036
<b>Appropriation of result</b>				
Addition to/withdrawal from:				
continuity reserve		245.973	0	0
earmarked reserves		1.273.191	141.468	-24.559
named funds		-8.761	0	-8.554
earmarked project funds		45.324	-131.000	114.149
		<b>1.555.727</b>	<b>10.468</b>	<b>81.036</b>

# General Information

## Netherlands office

Eye Care Foundation

Postal address P.O. Box 59021  
1040 KA Amsterdam  
The Netherlands

Visiting address Naritaweg 12-D  
1043 BZ Amsterdam  
The Netherlands

Telephone +31 (0)20 - 647 38 79

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Website [www.eyecarefoundation.nl](http://www.eyecarefoundation.nl)

ABN AMRO NL14 ABNA 0543 4445 54

Dutch Chamber of  
Commerce number 34 305 700

Newsletter 'Eye Care Newsletter', in May and  
November 20,000 copies printed

PBO Eye Care Foundation is a Public  
Benefit Organization

CBF Eye Care Foundation is accredited  
by the Central Bureau on  
Fundraising

## Office Nepal

P.O. Box 2389, Triploreswore, Kathmandu

T +977 1 4260 804 / 4256 711

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## Office Vietnam

23 - Truong Dinh Street

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Ho Chi Minh city

T +84 (08) 3929 3207

F +84 (08) 3929 3207

## Office Cambodia

Office#160, Street 71

Tonle Bassac, Chamkar Morn

P.O. Box 2471

Phnom Penh

T +855 23 994 145



## Board

Chair	A.M. van Praag
Vice-chair	H. Kemme
Treasurer	M. Septer
Member	L. Hummel
Member	R.M.J. van den Brink

## Office employees in Amsterdam, the Netherlands

R. Wiedijk, Director  
 Y.J.M Reifler, Project Director  
 E.J. Kenter, Programme Manager  
 R. van der Helm, Programme Manager  
 M.E. van Veen, Manager of Fundraising and Communication  
 M.E. Geels, Communication/Fundraising  
 T. Wortman, Communication/Fundraising  
 S.J.V. van Leeuwen, Head of Finance

## Volunteers

L. Marmelstein, administration support  
 L. Nuij, administration support

## Medical advisers

J.M. den Boon, Ophthalmologist  
 C. van der Windt, Ophthalmologist  
 H. Kemme, Ophthalmologist  
 A. Lefeber, Ophthalmologist  
 The Anh Mai, Ophthalmologist  
 C. Hiemstra, Ophthalmologist

## Office employees Kathmandu, Nepal

Anil P. Gorkhaly, Executive Manager Nepal  
 Sujata Gautam, Administration and Finance  
 Mani Ram Pradhan, Logistic Staff

## Office employees Ho Chi Minh City, Vietnam

Luong Thi Quynh Lan, Country Representative Vietnam  
 Mark Daggars, Fundraising Officer  
 Tran Phan Quy Ngan, Administration

## Office employees Phnom Penh, Cambodia

Sao Chhorn, Country Representative Cambodia  
 Ouk Soumuny, Administration and Finance

## Employee Laos

Khounkham Inthasone, Project Manager Laos

## Accountant

Dubois & co, Amsterdam



**EYE**  
**CARE**  
FOUNDATION