

# المحمد وللورت العلمان



# **PROFILE**

# BIN QUTAB FOUNDATION

## **BEGUM NOOR MEMORIAL HOSPITAL**

#### BHUBHAR-CHAKWAL RURAL



As on 28<sup>th</sup> November, 2024

#### Founder: Mr. Bashir Malik

(BABA BASHIR, Cell & Whatsapp: 0300-8496280)

BEGUM NOOR MEMORIAL HOSPITAL BHUBHAR-RURAL CHAKWAL (Project of Bin Outab Foundation) All Donations are Tax Exempted under income Tax Ordinance 2001

**Bin Qutab Foundation** is Registered in Pakistan Under Section 42 of Companies Act, 2017 Securities and Exchange Commission of Pakistan, Government of Pakistan



UAN: 111-637-637

Email

bashir.malik@binqutabfoundation.org



BabaBashirPk





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## THE CORE IDEA

We envision establishing an easily replicable model healthcare institutions" to alleviate human kind from its suffering due to lack of quality and affordable health services, especially the underprivileged segment of society residing in rural areas, to restore their dignity with compassion.







#### **EXECUTIVE SUMMARY**

BIN QUTAB FOUNDATION (BQF) Envisioned to work for the cause of Rural-healthcare, Education, Women Empowerment, and skills development through collaborative actions to create lasting change, Bin Qutab Foundation (BQF) established in the year 2007, a Corporate Social Responsibility (CSR) initiative of Bin Qutab Group (an overseasPakistani family-owned business group, native of Bhubhar village in Rural Chakwal) was incorporated as not for profit, civil society organization with SECP Govt. of Pakistan in 2007 as section 42 of the Companies Ordinance, 1984 vide registration number 0061555. All Donations are Tax Exempted under Income Tax Ordinance 2001.

Our health is everything. We believe good health care is everyone's right. 64% Pakistani population that resides in villages are not having proper access to basic health facilities. Contrary to the ground realities, metropolitan cities have been the center of Governmental priorities and preference of the development sector too. Diseases result in misery, pain, and poverty for millions of rural people across Pakistan. That's why treating and preventing disease is so important to BIN QUTAB FOUNDATION (BQF).

District Chakwal, our entry point, a district with the highest number of disabled persons as per Punjab Govt. Statistics, an alarming percentage of hepatitis and other deadly diseases have now become a home to road accidents as well. As per the recent census, 87.85% population of district Chakwal resides in villages and lacks featured healthcare facilities, thus patients are referred to tertiary care hospitals of Rawalpindi/Islamabad a 3 Hours" drive. In doing so many patients lose their lives on roads, while the survivors are admitted to over burdened hospitals.

Alhamdulillah, with the candid support of our worthy patrons, Bin Qutab Foundation (BQF) started restoring hopes and established. It's First Flagship Project **Begum Noor Memorial Hospital** at Bhubhar Chakwal Rural.

**IHITC** (Isolation Hospital & Infections Treatment Centre), Islamabad is a 250 Bedded Hospital owned by Federal Ministry of Health, Which had been managed by **BIN QUTAB FOUNDATION (BQF)** under Public Private Partnership from 7th July, 2020 to 31st December, 2022 as well.





#### THE FOUNDER OF BIN QUTAB FOUNDATION (BQF)

BIN QUTAB FOUNDATION (BQF)'s journey was taken to realize a dream, a dream for the people of Pakistan, for those dwelling in rural areas of the country. Muhammad Bashir Malik (popularly known as Baba Bashir) is Founder of the Foundation.



The story of the BIN QUTAB FOUNDATION (BQF) and Muhammad Bashir Malik run parallel. He was born on 8th October 1947 in Chakwal, Punjab and so was the foundation in that way. He attended high school at Mulhall Mughlan in Tehsil Chakwal and was fortunate to find his first job on 11<sup>th</sup> of May 1962, at the age of 14 and a half years, as a Floor/Tool Cleaner in a factory based in Karachi. For 2 years, he struggled as a labourer. He attended evening college classes at Sindh Madrasatul Islam Commerce College in the evening classes presently at SMI University. Unfortunately, due to financial constraints, he remained a college dropout.

He got married in 1966 and having one daughter (Rubina Faisal) & five sons Tanveer Malik, Tauqeer Malik, Qadeer Malik, Waseem Malik and Faheem Malik.

In 1964, his career growth began, and from a typist in a Cargo Company in Karachi, he retired as General Manager from one of the largest logistics company in Pakistan in 1995. During these 30 years he lived and traveled in dozens of foreign countries including Africa. He stepped in social entrepreneurship in 1989 by exporting Khussa (Ethnic Shoes) and later Domestic Drinking Water Filters, d i s t r i b u t i o n which transformed into Bin Qutab Group, a group of companies that deal in Projects Logistics, Supply Chain, Water, and WasteWater Treatment, Project Contracting and supplies etc in Pakistan, Dubai (UAE) & Egypt.

The inspiration to help was always present, but the demise of his mother due to cardiac issues in 1980 inspired him to ensure he played his role to help those who were vulnerable to death, due to lack of services, due to poverty; a dilemma his mother had to face and eventually took her life. BIN QUTAB FOUNDATION (BQF) was formed in 2007, to bring social change in the rural health sector. **Begum Noor Memorial Hospital** started operations on Pakistan Day, 23rd March 2016 and has served **1,000,000** Plus patients till 30<sup>th</sup> June, 2024.





#### **MISSION**

We aim to restore hopes of the under-privileged rural population in the health sector by providing equitable access to health care services by providing solutions to patients through high quality and highly responsive health care mechanism; a mechanism that is run through volunteer community participation, support of corporate sector philanthropic contributions, and collaboration with the public the sector as well as Natives of the Area. Where health care projects and programs are established

## **OBJECTIVES**

To aid, assist, set up, maintain, administer hospitals, nursing homes, mother and child health care centers, immunization and vaccination centers, family planning centers, diagnostic centers, and eye health care treatment centers. Provision of quality health facilities to unprivileged rural communities of District Chakwal at door step through the establishment of a modern hospital furnished with state-of-the-art electro-medical equipment.

It is an endeavor to assist the Government to improve health infrastructure in rural backward areas. Provisioning of preventive and curative primary/secondary health services, school health services, and health education programs in remote villages peri Urban/city slums in Pakistan.

#### **HOSPITAL SERVICE POLICY**

Anybody who walks into the Hospital is to be treated whether he got money or no money. Patients who are eligible for Zakat are treated FREE of Cost on the Zakat account. Other needy and poor patients are treated against Donations either FREE of Cost on subsidized cost which varies from case to case. Well to do families are required to pay their Bill for the services they get.





#### **BOARD /TRUSTEES**

Mr. M. Bashir Malik Founder Chairman Justice ® Fazal Miran Chohan Mr. Muhammad Tauqeer Malik **CEO** Mrs. Shahida Parveen Director Mr. M. Tanveer Malik Director Director Dr. Ajmal Nasir Dr. Saba Pervaiz Director Mr. Faisal Malik Director Ms. Iqra Faisal Director

## **HOSPITAL MANAGEMENT TEAM**

Mr. Ijaz Ali Khan Director (Hospital Projects)

Mr. Muhammad Usman Director (Corporate Compliances)

Mr. Attique Mirza Director (Legal)

Mr. Arshad Awan Director (Finance & Investments)

Mr. Fahim Malik
Mr. Ajmal Nasir
Director (International Collaborations)
Director (Research & Development)
Director (Public Sector Communication)

Mr. Shoaib Khan Director (Partners Affairs)

#### **ADVISORY BOARD**

(Under Formation)

✓ Central Advisory Board-Islamabad (CAB)

✓ Regional Advisory Council All Provinces (RAC)

✓ Districts Advisory Team (DAT)





#### **BQF & SDGS (SUSTAINABLE DEVELOPMENT GOALS)**

BIN QUTAB FOUNDATION (BQF), through its flagship program – Begum Noor Memorial Hospital seeks to facilitate the government in achieving the commitments it has made towards the accomplishment of the UN Sustainable Development Goals.

Our focus is on Goal 3 i.e. to ensure healthy lives and promote well-being for all ages. The following targets of Goal 3:3.1: By 2030, reduce the global maternal mortality ratio to less than 70 per 100,000 live births.3.2: By 2030, end preventable deaths of newborns and children under 5 years of age, with all countries aiming to reduce neonatal mortality to at least as low as 12 per 1,000 live births and under-5 mortality to at least as low as 25 per 1,000 live births.3.4: By 2030, reduce by onethird premature mortality from non- communicable diseases through prevention and treatment and promote mental health and well- being.3.8: Achieve universal health coverage, including financial risk protection, access to quality essential health-care services and access to safe, effective, quality and affordable essential medicines and vaccines for all Pakistan is a country of over 200 million people. Our total expenditure on health as a percentage of GDP (2020) hovers around 2.6%, which shows either the issue of health is not a priority of the successive governments or Pakistan has not accomplished the framework or resources for the smooth delivery of health services to its citizens. In this context, the role of private-sector health service providers, especially those operating on a nonprofit basis, is considered important and the need of the hour. Services at Begum Noor Memorial Hospital are accessed by the poverty-stricken segment of the society, the most vulnerable segment of the society. Through our hospital, we are reaching out to children, mothers, and patients at large who are in need of life-saving medicines.





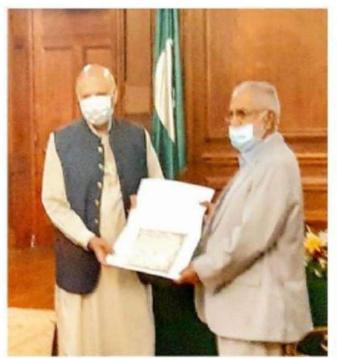
## **RECOGNITIONS**

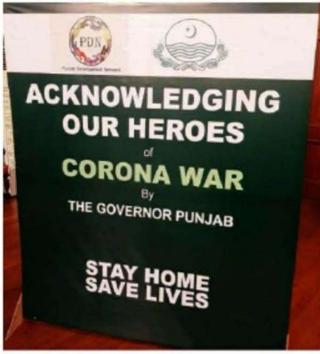
President of Pakistan Dr. ArifAlvi conferred the Federation of Pakistan Chamber of Commerce and Industry (FPCCI) 7th Achievement Awards for 2019 upon 40 recipients for rendering meritorious services in different sectors on July 25 at Aiwan-e-Sadr. Mr. Muhammad Bashir Malik was awarded for his contributions towards making a difference in the field of rural healthcare.





















**DR. ABDUL QADIR KHAN** GIVING AWARD TO FOUNDER **M.BASHIRMALIK** 



PRESIDENT MR. MAMNOON HUSSAIN GIVING AWARD TO CO FOUNDER/TRUSTEE MR. TAUQEER MALIK





## IHITC - Isolation Hospital and Infections Treatment Centre A Public Hospital Managed by Bin Qutab Foundation (BQF)

#### **Background:**

During the height of the COVID-19 pandemic in Pakistan, the government recognized the need for a modern healthcare facility to manage the surge in infections. As part of this response, the Isolation Hospital and Infections Treatment Centre (IHITC), a state-of-the-art 250-bed facility, was built to handle the influx of COVID-19 patients. The hospital was designed with the latest technology and infrastructure to provide specialized treatment for infectious diseases. Upon its completion, the Government of Pakistan sought expert management to ensure the hospital's effective operation and invited Bin Qutab Foundation to take charge of this crucial project.

#### **Solution:**

**Bin Qutab Foundation** accepted the challenge of managing IHITC for a period of 18 months. With a dedicated team of doctors, paramedics, and administrative staff, the foundation took full responsibility for the hospital's day-to-day operations. The foundation implemented rigorous infection control protocols and ensured that patients received high-quality care in a safe environment. This involved not only medical treatment but also efficient coordination of resources, logistics, and human capital to meet the extraordinary demands of the pandemic. By providing continuous support, Bin Qutab Foundation ensured the hospital's smooth functioning during a critical period.

#### **Outcome:**

The successful management of IHITC by Bin Qutab Foundation was a significant contribution to the national effort to combat COVID-19. The hospital treated thousands of patients, offering them the care they needed in a time of national crisis. The foundation's efforts exemplified the effectiveness of public-private partnerships in healthcare, showcasing its ability to provide specialized services in collaboration with the public sector. Through this endeavor, Bin Qutab Foundation not only saved lives but also reinforced its commitment to serving humanity in times of need.









29/08/2024

#### To Whom It May Concern

This letter is being issued with reference to the application for PCP Certification of 'BIN QUTAB FOUNDATION' based in Lahore.

As part of the evaluation process, performance evaluation of the NPO has been conducted based on which the case will be presented before the Certification Panel in due course of time.

In view of the above, it is requested to extend facilitation to the organization while we process their case at our end.

This letter is being issued on the request of 'BIN QUTAB FOUNDATION'.

Regards

Naveed Yousaf

Manager Certification









#### SECURITIES AND EXCHANGE COMMISSION OF PAKISTAN

#### CERTIFICATE OF INCORPORATION

[Under section 32 of the Companies Ordinance, 1984 (XLVII of 1984)]

Company Registration No. 00000018220/20070602

I hereby certify that "BIN QUTAB FOUNDATION" is this day incorporated under the Companies Ordinance, 1984 (XLVII of 1984) and that the company is an Association under section 42 of the Companies Ordinance, 1984 vide Licence No.CLD/RD/Co.42/24/2007 dated 28-05-2007 issued by Securities and Exchange Commission of Pakistan, Islamabad.

Given under my hand at LAHORE this 12th day of June, 2007

(Two Thousand and Seven.)

Fee Rs. 25,000/-

(MAHBOOB AHMAD)

JOINT REGISTRAR OF COMPNAIES

NO. ARL 2538

DATED: 12/6/1

Lahoro Vo







#### 2(36%c) (Order to grant / refuse / maintain / withdraw approval to Non-Profit Organization)

Name: BIN QUITAB FOUNDATION

Address: 407-A-1, GULBERG-III, LAHORE, Lahore

**Guiberg Town** 

Contact No: 00923255267267



Registration No 2952531

Tax Year: 2024

Period: 01-Jul-2023 - 30-Jun-2024

Medium : Online Due Date : 16-Aug-2024

Document Date 16-Aug-2024

BIN QUITAB FOUNDATION - NTN-2952531 (hereinafter referred to as the applicant) have applied for renewal of approval under Section 2(36) of the income Tax Ordinance, 2001 through iris vide barcode 100000194137704, dated 26-04-2024 for tax year 2024.

In order to evaluate the performance of the applicant in terms of clause (g) of sub-rule (Z) of Rule 211 of the income Tax Rules, 2002, a committee consisting of departmental officers was constituted. The Committee evaluated the performance under the relevant provisions of the income Tax Ordinance, 2001 and the income Tax Rules, 2002 and submitted its report vide letter bearing No. Zone-9174 dated 08.08.2024 and has proposed that the applicant may be granted of renewal of approval as a Non-Profit Organization under section 2(36) of the Ordinance.

I have given due consideration to the record and report submitted by the committee and I am of the opinion that the applicant duly complies with the requirements of the relevant income Tax Rules and ments approval under section 2(36) of the Ordinance. Therefore, the applicants request for granted renewal of approval as a Non-Profit Organization is hereby approved subject to following conditions:

- This approval is valid for a period from 15.06.2024 to 30.06.2025 shall expire on 30-06-2026 unless withdrawn earlier.
- The taxpayer shall also get its performance evaluated by the PCP for renewal of its status as an NPO. The approval will not be granted without PCP certificate.
- The applicant shall apply aftesh under the prescribed rules for re-evaluation of its status as a Non-Profit Organization in terms of Section 2(36) of the Ordinance at the end of the expiry period.
- During the period mentioned at Serial No.1, the NPO shall comply with all the relevant provisions and rules including Section 100C of the Income Tax Ordinance, 2001 and Chapter XVII of the Income Tax Rules, 2002, in case of violation of any legal provisions or relevant rules, the approval shall stand withdrawn ab-initio.

#### Adnan Ahmad Khan

Commissioner Inland Revenue, Zone-I CTO LAHORE, TAX HOUSE SYED MAUJ E DARYA ROAD LAHORE

Page 1 of 1

Printed on Date: Sun, 18 Aug 2024 02:04:

CTO LAHORE, TAX HOUSE BYED MAUJ E DARYA ROAD LAHORE

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## FEW MAJOR DONORS

HABIB BANK	Bank Alfalah	askaribank	Soneri Bank Rostun Har Qudurn
<b>⊗</b> NBP	B P THE BANK OF PUNJAB	Burj Bank Burj Bank	Meezan Bank The Premier Islamic Bank
BIN QUTAB GROUP	APEX GROUP DUBAI-SAUDIA-CHAKWAL	Infaq	Maÿter PAINTS
Pakistan State Oil	IZHAR GROUP OF COMPANIES	olympia	PEL
newage®	<b>⊘RIENT</b>	COLARIONS	HYUNDAI HOME APPLIANCES
Shan	Brighto	Four Brothers	
Hi-Tech Lubriconts Ltd	Leopards There for You	FATIMA GROUP	Mass Pharma (Pvt) Ltd.  EXCELLENGE IN PHARMACEUTICALS





## FEW MAJOR DONORS









## BEGUM NOOR MEMORIAL HOSPITAL BHUBHAR, RURAL CHAKWAL

Begum Noor Memorial Hospital is a "state of art"50 plus bedded hospital Approved by PHC that is located in Village Bhubhar, Rural District Chakwal. The hospital is providing quality services in the fields of primary, secondary, and tertiary medical services; services include 24/7 Emergency, Trauma, Pharmacy, X-Ray, Diagnostic Lab, Rehab Center, Dialysis Center with 13 Dialysis Machines, ICU, Male & Female Ward, 05 fully functional Operation Theaters, Gynae/OBS/Delivery, Dental Care, Dermatology, ENT, Eye, General Surgery, and Gastroenterology and Ambulance Service. The hospital is duly registered under the Punjab Health Care Commission as Category "A" Hospital, the very first in whole or Rural Punjab in Pakistan.







## **EXPANSION PLAN**

#### BEGUM NOOR MEMORIAL HOSPITAL BHUBHAR, RURAL CHAKWAL

We are currently Serving with **50 Beds** Approved by **Punjab Health Care Commission (PHC)**, First class Facility to the Rural Community of Pakistan. The Construction of **12000sq/ft** second floor is under completion and now Begum Noor Memorial Hospital Bhubhar, Chakwal, is going to add more **150 Beds** in existing setup till the end of **Year 2025** along with other infrastructural additions which are in progress as well. With that expansion the total capacity of the hospital will be **200 Beds** by the end of 2025.(Insha-Allah).

#### Facilities Improvement/Additions/Upgradation & Capacity Building:

Improvement of all Departments & Sections at hospital is always a continuous process and we are improving each facility day by day.

## **Structural Expansions:**

- 1. Cardiac Block
- 2. Children's Block
- 3. Surgical Block
- 4. Burn Centre
- 5. Palliative Care Centre
- 6. Geriatric Care Centre
- 7. Hepatitis Clinic
- 8. Deadly Diseases Registry
- 9. Honour Home
- 10. Staff Residential Flats
- 11. Doctors Residences & Flats





## **DATA OF PATIENTS SERVED**

## **1,000,000** Patients treated

From

23rd March, 2016 till 30th June, 2024

## **Department wise details**

Medical OPD	792,709
Specialist OPD	64,528
Emergency	36,371
Dialysis (Sessions)	27,162
Dental	15,632
Eye	23,168
Gynae	52,225
Rehab	23,715
	1,035,510

## **Surgeries**

Gen. Surgeries (Started in 2019)	4521
ENT Surgeries (started in 2021)	1,115
Orthopedic Surgeries (Started in 2022)	915
Urology surgeries (Started in 2024)	141
Gynae/OPS (started in 2022)	1811
Eye Surgeries (started in 2020)	2891
Total	11,394

## **Thalassemia services**

Total Patients	1394
Blood transfusions	971





## PAITENTS SERVED AGAINST SEHAT CARD upto 30<sup>th</sup>June, 2024

Dialysis	6,508
Eye Surgeries	152
General Surgeries	1,157
Orthopedic Surgeries	164







## FINANCIAL BENEFITS PASSED TO COMMUNITY

upto 30<sup>th</sup>June, 2024

Zakat (Free Treatment)	30,275,998
<b>Subsidized Treatment</b>	25,246,857
Free Medical Camps	24,654,780
Flood Relief	8,900,000
Food Distribution	12,258,000
Free & Specified food to patients (since	18,450,880
2021)	
Provision of wheel chairs	250,000,000
Provision of scholarships (Education) in Bin Qutab College of Health Sciences, Free accommodation and subsidized food	1,800,850
Misc	5,080,000
Total	376,667,365

## **DOCTORS LIST**

Name	Designation	PMDC	Full time /Visiting	No Of Visits
DR Ateeq Ahmed Khan	Medical Superintendent	32557-P	Full Time	
Dr. Arslan	MBBS,RMP	114299-P	Full Time	3 shifts per day
Dr. Fatima	MBBS,RMP	-	Full Time	3 shifts per day
Dr. Afzal	MBBS,RMP	760932-01-m	Full Time	3 shifts per day
Dr. Sadia	BDS	17813-D	Full Time	3 shifts per day
Dr. Mahdeed	Pharm-D (Registered Pharmacist)	31426-a/23	Full Day	09AM-02PM
Dr Aiman Maheen	DPT	N/A	Full Day	09AM-02PM
Consultants				
Dr. Illiyas Riaz	MBBS,FCPS	3505-AJK	Visiting	Twice a week
Dr. Arshad	MBBS,FCPS Anesthesia	3596-AJK	On Call	On Call





Dr. Abdul Rehman	MBBS,FCPS	56547-P	Visiting	Twice a week
Dr. Irfan	MBBS,FCPS	3559-AJK	Visiting	Every Sunday
Dr. Mustansir	MBBS,FCPS	2809-AJK	Visiting	Once a month
Dr. Faizan	MBBS,FCPS	72132-P	Visiting	Every Sunday
Dr. Irfan Anaesthetist	MBBS, DA Training Complete, MBA	60989-P	On Call	On Call
Dr. Yaqoob	MBBS,FCPS	63035-P	Visiting	Twice a week
Dr. Umer	Radiologist	76566-P	Visiting	Twice a week
Dr. Kashif	MBBS,FCPS	78479-P	Visiting	Every Saturday
Dr. Hajra	MBBS,FCPS	78482-P	Visiting	On Call
Dr. Mehwish	MBBS,FCPS	71652-P	Visiting	Every Friday

## **STAFF MEMBERS LIST**

Ser	Department	No. Of Staff	Remarks
1.	Nursing Department	10	Male: 06, Female: 04
2.	Laboratory	02	Male : 02, Female : 00
3.	Pharmacy	05	Male: 04, Female: 01
4.	Reception	02	Male: 02, Female: 00
<b>5.</b>	X-Ray	02	Male : 02, Female : 00
<b>6.</b>	Dialysis	02	Male : 02, Female : 00
7.	Blue Color	10	Male : 10, Female : 00
8.	Electric & Plumbing	01	Male: 01, Female: 00
9.	Accounts	02	Male: 02, Female: 00
10.	Ward Boys	02	Male: 02, Female: 00
11.	Drivers	03	Male: 03, Female: 00
<b>12.</b>	Supervisory Staff	03	Male: 03, Female: 00
13.	Administration	05	Male : 05, Female : 00
14.	Doctors	08	Male: 03, Female: 05
15.	Consultants Doctors	10	Male: 08, Female: 02
	Total:	<b>67</b>	<b>Male: 55, Female: 12</b>





## **LIST OF EQUIPMENTS**

Ser	Equipment Name	Model No	Remarks
Laborat	ory		
1.	Sysmex XP-100	XP 100	
2.	MINDRAY BS 230	MN Mindray BS 230	
3.	Humalyte Plus3	17470/10	
4.	Humalyzer 3500	Ref-16800	
5.	Humareader HS	Ref-16670	
6.	Huma DUO Clot	Ref-15650	
7.	Huma Aqua5	MN Huma Aqua5	
8.	Centrifuge Machine	EBA 20S	Routine maintenance carried out
9.	Deep Freezer	PDFT-155	Routine maintenance carried out
10.	Refrigerator	MN 9188D	Routine maintenance carried out
11.	Blood Cabinet		Routine maintenance carried out
12.	Microscope Olympus	MN CX22LEDRFS1	Routine maintenance carried out
13.	Incubator (Hot Air Oven)	30 LIT	Routine maintenance carried out
14.	Blood Bag Shaker	FH2-7080	Routine maintenance carried out
15.	Advantage Lab	Advantage Lab 671350	Routine maintenance carried out
16.	Blood Line Blood Cabinet		Routine maintenance carried out
17.	Centrifuge Blood Bank	MN Pro- Research.K2015R	Routine maintenance carried out
18.	Laptop	L3-AEK1Y0811	Routine maintenance carried out
19.	PC	MT/M.1962-A1g	Routine maintenance carried out
20.	Micropipette		Routine maintenance carried out
21.	HP Laserjet Printer 1320	Q5928A	Routine maintenance carried out
22.	Grouping Light	MN3438	Routine maintenance carried out
23.	PCR Machine	Packed	
24.	Chemistry AnatiscoRyto RT9700	4112005021 IE	
X-Ray			
1.	X-Ray Machine Toshiba 500 MA	BLR-1000A	
2.	Direct Digitizer	A5ER-50845	
3.	Laser Imaging Printer		
<u>Dental</u>			
1.	Dental Unit	KLT-6210	
2.	Dental X-Ray Tube Part	XD2-1.4/85	
3.	Compressor	SD 70/8	Routine maintenance carried out
<u>EYE</u>		1/2 - 100	
1.	Auto RefractoKerato Meter	KR-7100	





2.	Slit Lamp	OT-3	
3.	Auto Kerato meter	KM-500	Routine maintenance carried out
4.	A-Scan	SP-1000-A	Routine maintenance carried out
5.	Retiono/Ophlhatmosocope	DT801	Routine maintenance carried out
<u>Dialysi</u>	<u>s</u>		
1.	2x Fresensius	4008S Next Generation	
2.	Fresensius	4008S	
<u>Gynae</u>			
1.	Ultrasound	HS 2000	
2.	ECO	ECO-6	
<b>Physio</b>	therapist		
1.	Treadmill		Routine maintenance carried out
2.	Infrared		Routine maintenance carried out
3.	Tense	BE660	Routine maintenance carried out
4.	Massager		Routine maintenance carried out
5.	Hot Pack		Routine maintenance carried out
6.	Cycling		Routine maintenance carried out
7.	Passive Cycling		Routine maintenance carried out
8.	Suspension		Routine maintenance carried out
9.	Lifter		Routine maintenance carried out
10.	Standing Frame		Routine maintenance carried out
11.	Stationary Cycle		Routine maintenance carried out
12.	Shoulder Wheel		Routine maintenance carried out
13.	Walking Frame		Routine maintenance carried out
14.	Elliptical	4000 PT	Routine maintenance carried out
15.	Stairs Frame		Routine maintenance carried out
16.	CP Walker of Sitting & Standing		Routine maintenance carried out
<b>Emerge</b>	ency / Minor OT		
1.	2 x OT Lights	735	
2.	Auto Clave	SA-232	
3.	2x Suction Machines	7E-A and 797	
4.	5x Cardiac Monitor		
5.	ECG Machin		
6.	2x Nebulizer		Routine maintenance carried out
7.	7xOxygen Cylinders		Routine maintenance carried out
Genera	II/ Gynae OT		
1.	OT Light	734	
2.	Anesthia Machine	WATO EX-20	





3.	Cardiac Monitor	PG M9000	
4.	Suction Machine	6.4P	
5.	Diathermy Machine	400D	
6.	1x Oxygen Cylinder		Routine maintenance carried out
7.	1x Milrous Cylinder		Routine maintenance carried out
Eye OT			
1.	Phacoemalsifier Bosch & Lomb	CX-6200	Not Functional
2.	Operating Microscope	OM-5	
<b>Orthop</b>	edic OT		
1.	OT Light		
2.	C-ARM	718031	Purchased on 27 <sup>th</sup> March 2021
3.	Endoscopy	Ref RCM27HD	Purchased on 27 <sup>th</sup> March 2021
4.	Suction	7E-A	Routine maintenance carried out
5.	Traction Table		Routine maintenance carried out
<u>ICU</u>			
1.	Ventilator	CH-7403	
2.	5x Infusion Pumps		
3.	Crush Trolley		
4.	3x Cardiac Monitor	PG M9000, CM10000, SN M8160200551	
5.	Defibrilator		
<u>CCU</u>			
1.	Cardiac Monitor	CM1000	
2.	Defibrilator	68	
Miscell	<u>aneous</u>		
1.	Multiline Generator	6BT5.9-G2	
2.	UPS		
3.	AC		
<u>Vehicle</u>	<u>es</u>		
1.	LET-17-637 (Ambulance)	2017	
2.	IDK-6712 (Old Ambulance)	1988	
3.	LET-17-937	2017	
4.	(FAW Ambulance) LES-13-2983 (Mobile Van)	2013	
5.	LE-11-637 (Honda Car)	2011	Routine Maintenance Carried out
6.	LEA-07-637 (Corolla Car)	2007	Routine Maintenance Carried out
7.	CHL-16-4745 (Motorcycle)	2016	
	, ,		





#### ISLAMABAD – IHITC HOSPITAL.

This IHITC is a Central Government Hospital. The Ministry of Health is the Principle owner. BIN QUTAB FOUNDATION (BQF) established a Welfare Pharmacy, with the collective efforts of Doctors, Nurses, Paramedics and Staff, medicines for an amount of **1.5 Crore** Plus has been given to the Poor and Needy patients who are otherwise being treated at this Hospital Free of Cost except Medicines.







# PHARMACY LICENSE ISSUED BY DRAP-PAKISTAN



(Medical, Dental & Veterinary Practice Not Allowed)



This Drug Sale Licerue is computer-generated.













#### Pakistan Nuclear Regulatory Authority

Regional Nuclear Safety Directorate-I Mauve Area, G-6/1, Islamabad

License No: X201(495)

Dated: June 09, 2020

#### LICENCE FOR DIAGNOSTIC RADIOLOGY

Pursuant to the powers conferred by PNRA Ordinance No. III of 2001 and Regulation PAK/908, the Pakistan Nuclear Regulatory Authority is pleased to issue license to

#### Muhammad Taugeer Malik, Begum Noor Memorial Hospital

To own/operate radiation apparatus with following specifications:-

One (01) Radiation Apparatus (Dental X-ray Unit)

for diagnosis purpose at:-

Begum Noor Memorial Hospital, Sohawa Road, Near Mulhal Mughlan, Village Bhubhar, Chakwal

and for no other purpose/site.

#### GENERAL CONDITIONS

- Unless terminated earlier, this license shall be valid up to June 30, 2020 after which it is to be renewed. This license covers only the facility as described above.
- The licensee shall be bound to abide by the provisions of PNRA Ordinance No. III of 2001, Regulations PAK/908, Regulations PAK/904 and any other conditions imposed by this Directorate from time to time. In case of breach of any of these provisions and/or conditions, this license shall be liable to cancellation or suspension.

Issuing Authority on behalf of and under the authority of PNRA

SIGNATURE:

M. Nagem Akhtar

SEAL OF OFFICE:

Director guns tucced Salety Directories gare tucced Salety Directories gare tucced Salety Salety Major king Gel 1 Iranicas





#### INFRASTRUCTURE & ASSESTS

#### **Hospital and Education Facilities:**

√ Total Land Area: 15 Kanal (9,075 sq yards)

#### **Covered Area:**

 Main Clinical Building – 24,000 sq feet (Ground and First Floor) 12,000 sq feet 2nd Floor (Under Completion) – Emergency Department – 2,200 sq feet Female Accommodation – 2,200 sa feet Male Accommodation – 1,400 sq feet Café – 850 sq feet Masjid – 1,600 sq feet 8,400 sq feet Nursing College – Executive Office/Donors Lounge -850 sq feet Auditorium (Rehman Hall) – 3,300 sa feet

Auditorium (Rehman Hall) – 3,300 sq feet
 Children's Block – 3,300 sq feet (Under Completion)
 Storage Rooms (4 units) – 1,500 sq feet

Nursing Hostel –
 Total Covered Area
 1,300 sq feet
 2,000 sq feet
 63,600 sq feet

#### Land Owned by Bin Qutab Foundation:

Reserved for Education Complex – 09 Kanal (5,445 sq yards) in Bhubhar, Chakwal (Rural)

Reserved for − 06 Kanal (3,630 sq yards)
 Education Extension Programme
 Reserved for Bin Qutab University − 22 Kanal (13,310 sq yards)

in Mona, Chakwal

#### **Mobile Healthcare and Equipment:**

Mobile Hospital (Truck-based) – 01 unit
 Ambulances – 03 units

Extensive Inventory – Includes hospital equipment, medical instruments, hospital furniture, and IT installations.





# MEDICAL EDUCATION BIN QUTAB COLLEGE OF HEALTH SCIENCES

The purpose of establishing **Bin Qutab College of Health Sciences** was to provide this noble profession into the rural areas of Chakwal and surroundings. This also engulfs the vocational development of the poor but intelligent and deserving community living in Chakwal & Surroundings. We are providing messing and lodging facilities as well to facilitate the students of far-flung areas. BQHS is a project of **BIN QUTAB FOUNDATION (BQF)**, recognized by Punjab Medical Faculty.

#### \*\*\*COURSES OFFERED\*\*\*

- 1. Dispenser Diploma
- 2. Medical Lab Technology Diploma
- 3. Operation Theatre Technology Diploma
- 4. Radiology and Imaging Technology Diploma
- 5. Dialysis Technician











#### **FUTURE COURSES:**

**EMT** (Emergency Medical Technicians) in the developed world every ambulance is accompanied by EMT Technician. This is mandatory over there. We plan to implement the same in Pakistan.





# MTECH COLLEGE OF SCIENCE & TECHNOLOGIES

#### **Addressing Educational Challenges in Rural Areas**

In rural areas like Bhubhar, Chakwal, access to quality education, particularly in science and technology, remains a significant challenge. Most students from rural regions, despite their talent and potential, find it difficult to pursue advanced education due to the need to relocate to urban centers. This not only adds a financial burden but also disconnects them from their communities. Bin Qutab Foundation, known for its commitment to addressing rural health and educational needs, has recognized this gap and is taking a major step to resolve it by establishing MTECH College of Science and Technology.

#### A Pathway to Progress: MTECH College of Science and Technology

MTECH College of Science and Technology, set to open in October 2024, will provide local students with top-end science and technology education in their own region. By eliminating the need for students to move to cities, the college offers a viable solution that brings world-class education to their doorstep. With modern facilities and a comprehensive curriculum, MTECH will equip rural youth with the skills and knowledge they need to excel in competitive, high-demand fields. The college is in the process of receiving affiliations and approvals from a degree-awarding public sector institution, ensuring that students receive accredited qualifications.

#### **Empowering Rural Communities for a Better Future**

The establishment of MTECH College of Science and Technology will have a profound impact on rural communities. By offering accessible education in cutting-edge fields, the college will empower students to contribute meaningfully to their local economy and beyond. Graduates will not only improve their own prospects but will also foster technological innovation and entrepreneurship in their region, ultimately reducing the educational and economic disparity between rural and urban areas. This initiative represents a significant milestone in rural development, aligning with Bin Qutab Foundation's mission of creating sustainable opportunities for the underserved.





# MEDICAL EDUCATION (EXPANSION PLAN)

### Medical Doctors and Nurses Shortage in Pakistan

In country like Pakistan which has a population of 220 million – a 5th largest country in the world – there is an extreme shortage of Doctors, Nurses and Para- Medics staff. Also, the available Medical Professionals and staff prefer to stay and work in the cities. BQF has focused Health Care projects are in Rural Pakistan, therefore it is very important for BQF to have its own Medical/Nursing/Paramedical College and later even a Medical University. We aim to achieve this by three phased interventions in the field of medical education.

## Phase One- College of Para-Medics

As part of our phase one programme, Bin Qutab College of Health Sciences for PARA-Medics is fully functional.

## Phase Two- Nursing College (04 Years Degree Programme)

We plan to establish a Nursing College attached to Begum Noor Memorial Hospital, Bubhar (Rural) Chakwal by the end of 2025.

#### Phase Three- Medical College/University

Once we reach the required threshold of facilities and demand, BQF plans to establish a Medical College/University while BNM Hospital becomes a teaching as well as Medical research Centre where rural youth are trained and educated as qualified doctors. Preference will be given to the youth who is willing to perform their duties in the far-flung areas after graduation.





## WHEEL A LIFE PROJECT

## (PROVISION OF WHEEL CHAIR & REHABILITATION PROGRAMME FOR SPECIAL PERSONS)

#### **Background**

The district of Chakwal, according to the Government of Pakistan census, has the highest number of disabled persons in Pakistan, with 9% of its population affected. This alarming statistic, unique to Chakwal, has not been thoroughly investigated since Pakistan's independence 78 years ago. The reasons behind such a high prevalence of disabilities remain unexplored. This significant oversight has left the disabled community in Chakwal without adequate support or resources for decades. Recognizing the urgent need for intervention, the Wheel A Life Project aims to address the challenges faced by physically disabled individuals and extend comprehensive rehabilitation services to those who are deaf, mute, and blind.

#### **Solution Provided by Bin Qutab Foundation**

The Bin Qutab Foundation has launched the **'Wheel A Life Project'** as part of its ongoing commitment to improving the lives of vulnerable communities. The project focuses on two key areas: the provision of wheelchairs to physically disabled persons and the implementation of a holistic rehabilitation program for all special persons, including the deaf, mute, and blind.

So far 1200 Wheel Chairs of costing 20.50 Million has been distributed. Bin Qutab Foundation is moving forward with a target of 15,000 Wheel chairs. (Insha Allah)

Starting in Chakwal, the project will gradually expand its services to cover the entire Rawalpindi district, which includes Chakwal, Jehlum, Rawalpindi, and Attock, as well as the rural areas of Islamabad. This initiative will not only address the physical mobility needs but will also provide tailored rehabilitation services to help these individuals reintegrate into society with dignity and independence.

#### **Outcome of the Project**

The Wheel A Life Project is expected to create a significant impact on the lives of disabled persons in the targeted areas. By providing mobility aids such as wheelchairs, it will enhance the independence and quality of life for physically disabled individuals. Moreover, the comprehensive rehabilitation program will empower special persons, offering them the support and skills they need to overcome barriers in communication, mobility, and education. The project's outreach will extend from Chakwal to the entire Rawalpindi district and the rural areas of Islamabad, making it a pioneering effort in addressing the needs of special persons in these regions. Ultimately, this initiative will lay the foundation for a more inclusive and supportive environment for disabled persons, improving their overall well-being and integration into society.





# WHEEL CHAIRS DISTRIBUTION











# **2000 FREE SURGERIES PROJECT**

#### FOR DESERVING PATIENTS

#### **Background**

The population of Chakwal district, like many other districts in Pakistan, faces a severe lack of awareness regarding preventive measures for deadly diseases. People often turn to unqualified practitioners, known as quacks, who administer excessive antibiotics and steroids, damaging vital organs. As a result, patients eventually land in government hospitals with serious conditions. Unfortunately, these government hospitals are overloaded, often operating at fifty times their capacity. Patients diagnosed and in need of surgery are subjected to long waiting times, sometimes ranging from three to four months. This situation prevails even in larger cities, leaving many patients in a dire state. For those who attempt to seek treatment at private hospitals, the high cost of surgery becomes prohibitive, as it is far beyond their financial reach.

#### **Solution:**

In response to this critical healthcare gap, Bin Qutab Foundation has launched the "2000 Free Surgeries Project" aimed at offering free surgeries to deserving patients. This initiative is already underway, providing relief to those who have been waiting months for necessary operations. By offering these surgeries free of charge, the foundation seeks to reduce the burden on government hospitals, ensuring that deserving patients receive timely medical attention. This charity-driven initiative is rooted in the foundation's commitment to supporting the underprivileged and providing access to life-saving surgeries that would otherwise be out of reach for them.

#### **Outcome:**

The 2000 Free Surgeries Project will significantly lessen the load on overcrowded government hospitals and provide patients with access to crucial surgeries without delay. This timely intervention will not only improve the health outcomes of thousands of patients but also save lives that would have been endangered by prolonged waiting periods. Furthermore, by addressing the gap between demand and capacity in public healthcare, this initiative will have a lasting impact on the healthcare landscape of the Chakwal district, alleviating pressure on public hospitals and offering a sustainable solution to the region's health crisis.



Contact Us: 0300-0563636, 0300-0407117 & 0300-0407107





# SEHAT KE DASTAK PROGRAMME

صحت کی دستک

Rural population screening diagnostics of deadly diseases and treatment through Field Medical Camps and Treatment at Begum Noor Memorial Hospital Bhubhar, Rural Chakwal.

# **Mobile Hospital**

Medical/Eye/Surgical/Gynae Camps with complete blood screening (since 1<sup>st</sup> Jan, 2019 to 30<sup>th</sup>June, 2024)

**Total Camps Conducted: 123 Patients Examined: 24177** 



Preventive Health care Sessions are also given to Local Communities during this Out Reach Programme.





# 50,000 PLUS CRONA VACCINATION PROGRAMMES

#### **Background:**

During the COVID-19 pandemic, Chakwal district faced significant challenges in managing the overwhelming demand for vaccinations. The district government struggled with a shortage of facilities and infrastructure to handle the heavy load of vaccinations required to protect the population. In this difficult situation, the District Management approached us at Begum Noor Memorial Hospital, Bhubhar, Chakwal, the largest and most modern healthcare facility in the rural area, for assistance.

#### **Solution:**

Recognizing the urgency of the situation, we at Begum Noor Memorial Hospital agreed to share the burden and support the district administration in managing the vaccination campaign. Our hospital stepped forward by utilizing its infrastructure, resources, and medical staff to ensure that the vaccination process ran smoothly. We set up dedicated vaccination centers, managed the influx of patients, and ensured that all COVID-19 protocols were strictly followed to protect both patients and staff.

#### **Outcome:**

As a result of our timely intervention, more than 50,000 individuals were successfully vaccinated during the program. This collaborative effort not only alleviated the burden on the district's health system but also ensured that the affected individuals received their vaccinations promptly and safely. Our support contributed to controlling the spread of the virus and protecting the rural population during a critical period of the pandemic.





# ENVIRONMENTAL AWARENESS SPOGOMI PAKISTAN

#### **SPOGOMI WORLD CUP TOKYO JAPAN 2023**

We are thrilled to share the resounding success of the first SPOGOMI World Cup Tokyo Japan-Pakistan stage, held in Lahore on September 24, 2023, at the Model Town Housing Society. This landmark event, held in collaboration with the esteemed Nippon Foundation Japan, marked a historic moment for Pakistan and highlighted our commitment to environmental protection.

A total of 30 teams representing various walks of life enthusiastically participated in this colorful and eco-friendly activity, demonstrating their passion for a clean and green future. The joint efforts of the Nippon Foundation Japan and Bin Qutub Foundation Pakistan brought together communities and individuals in a united front against environmental challenges.

The event was not only a celebration of environmental awareness but also a platform for friendly competition. The winning teams earned the honor of representing Pakistan in the World Cup finals in November 2023. This global stage, held in Tokyo, Japan, will provide our champions with the opportunity to showcase our nation's passion and commitment on an international platform.







# **FUTURE PROJECTS**

#### PATIENT FOLLOW UP CLINIC

Introducing the "Patients Follow-up Clinic," a pioneering initiative designed to address a critical gap in healthcare for rural areas, where literacy levels are often low, and patients may struggle to fully understand and adhere to medical guidance. In many rural regions, patients and their family members may be unfamiliar with complex medical instructions, leading to improper medication use or non-adherence, which can hinder recovery. Recognizing this challenge, our new service will provide essential follow-up care, ensuring that patients receive the support they need, even after they leave the hospital.

Three days after a patient's visit to the hospital, our trained staff will make a phone call to the patient or their attending family member to inquire about their well-being. This call will focus specifically on understanding how the patient is taking the prescribed medication and whether they are following the doctor's instructions accurately. Often, patients in rural areas are not fully aware of the importance of adhering to medical advice, and this follow-up ensures that they remain aligned with the treatment plan for their safety and well-being.

If it is found during these calls that the patient is not following the prescribed guidelines, our team will take immediate action. We will provide clear and simple instructions again, ensuring that both the patient and their family understand the importance of compliance for the best possible outcome. This proactive approach will help prevent complications that can arise from improper medication use or misunderstandings about the treatment plan.

In cases where the follow-up call indicates a more serious concern, our paramedic staff will be available to visit the patient's home. This home visit will not only reassure the patient and their family but also provide an opportunity for direct medical support and guidance. By offering this additional level of care, we ensure that patients feel supported even after they leave the hospital, reducing their anxiety and improving their health outcomes.

The "Patients Follow-up Clinic" is an innovative service, the first of its kind in rural Pakistan. By addressing the unique challenges faced by patients in these areas, we are setting a new standard in rural healthcare. This initiative reflects our commitment to patient safety and the well-being of the community, ensuring that every patient receives the follow-up care they need for a smooth recovery.





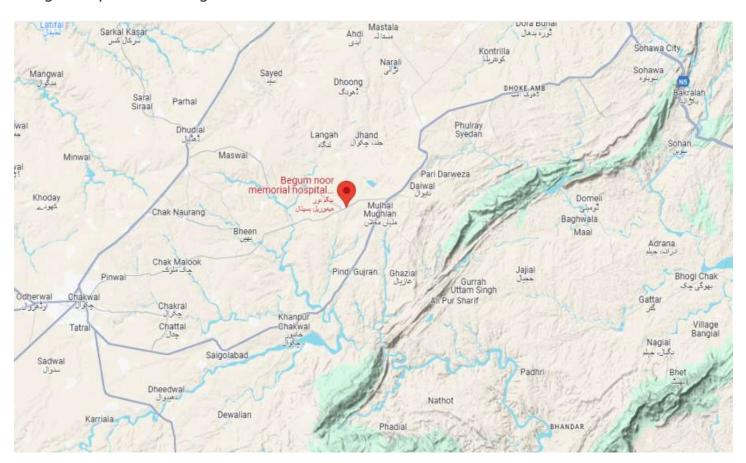
## **SHUTTLE SERVICE**

## Within 50 to 70 Kilometer Area around Hospital.

Unfortunately, the areas surrounding the hospital, spanning 50 to 60 kilometers, lack reliable public transportation, leaving patients dependent on unsafe options like rickshaws and dingis. These vehicles are not only prone to accidents but are also unsuitable for elderly patients, pregnant women, and those with severe medical conditions, especially given the hilly terrain and damaged roads.

To address this critical issue, we plan to introduce a shuttle service on seven key routes around the hospital. This service will ensure safe and timely transportation for patients, especially those who face challenges in accessing our hospital through the existing means. By providing a safer and more reliable transport solution, we aim to improve the overall healthcare experience for the rural population.

#### Google map as following of the area:







# **Telemedicine Clinic Project (TCP)**

Chakwal district, with its 87% rural population, faces significant challenges in providing timely and quality healthcare to its scattered villages. Setting up traditional small or medium-sized hospitals in these remote areas is logistically difficult and financially burdensome. The Telemedicine Clinic Project (TCP) offers a viable solution to bridge this gap. Through this initiative, we plan to establish telemedicine clinics strategically located in rural areas, all connected to our main hospital at Bhubhar, Chakwal.

These telemedicine clinics will leverage technology to provide remote consultations, diagnostics, and follow-up care. Patients in distant villages will have access to qualified doctors and specialists without the need to travel long distances. With the support of trained local paramedics and nurses, these clinics will facilitate real-time virtual consultations, ensuring that essential medical advice and prescriptions are delivered efficiently. This model will not only save time and resources for rural patients but also significantly improve health outcomes by making healthcare accessible to those who need it the most.

By integrating these clinics with our hospital's existing infrastructure, we aim to provide comprehensive, continuous care to rural communities.







# **The Satellite Nursing Homes Programme**

(Islamabad & Rawalpindi Cities)

#### **Background:**

The Struggles of Poor Patients and Families The Satellite Nursing Homes Programme addresses the dire needs of underprivileged families who travel long distances, often from 200 to 200 kilometers, to seek treatment for their loved ones in tertiary care hospitals in Rawalpindi and Islamabad. While wealthier families can afford accommodation in rest houses and hotels, these poor families, already burdened by debt and the sale of their assets, face the challenge of finding a place to stay when doctors request follow-up visits after a day or two. Without affordable lodging options, these families endure immense hardship as they attempt to care for their patients.

#### **Solution:**

Establishing <u>Satellite Nursing Homes</u> Bin Qutab Foundation proposes to setup five nursing homes along key routes and roads connecting the northern and southern populations visiting these hospitals. These nursing homes will offer free-of-cost services to patients and their attendants, including overnight stays, meals, paramedic care and safe transportation back to the hospital the next day. By providing a comfortable place to stay, medical support, and meals, the programme will remove the financial burden & hardship of frequent trips and accommodations for these struggling families.

#### **Outcome:**

<u>A Lifeline for Vulnerable Families</u> The Satellite Nursing Homes Programme will bring much-needed relief to families who face emotional and financial stress due to medical emergencies. By offering free services, the programme ensures that poor patients and their attendants have a safe, supportive space to rest, receive care, and continue their treatment without worrying about the cost of accommodation or transportation. This initiative promotes healthcare access and equality, providing a lifeline to the most vulnerable in our society.





# Research on Disabled and Special Persons in Chakwal District

#### **Background**

Chakwal district has the highest percentage of disabled and special persons in Pakistan, according to the Government of Pakistan census, where 9% of the population is disabled. Despite this alarming figure, no comprehensive research has been conducted to identify the underlying reasons for this high rate of disability. To address this gap, we aim to collaborate with universities, research institutions, and development organizations to initiate a thorough investigation into the factors contributing to this issue.

#### **Proposed Solution**

Our solution is to launch a detailed research project that will focus on understanding the causes behind the high prevalence of disability in Chakwal. We will involve experts from various fields to gather data and analyze trends. This research will identify both genetic and environmental factors that may be contributing to the problem. The involvement of educational and healthcare institutions will ensure that the study is thorough and covers all aspects related to disability in the region.

#### **Expected Outcome**

Based on the findings of this research, we will develop a comprehensive preventive program aimed at reducing the rate of disability in the district. This will include suggestions from healthcare professionals, genetic experts, and environmental scientists. The preventive program will address key areas such as early diagnosis, public awareness, healthcare interventions, and policy recommendations for local and national governments. Ultimately, this initiative will pave the way for improving the quality of life for disabled and special persons in Chakwal.





# Socio-Economic Impact of Begum Noor Memorial Hospital and its Programs (3<sup>RD</sup> PARTY REPORT)

#### **Background**

In rural Pakistan, there is a critical gap in healthcare infrastructure. Government healthcare facilities are limited to Basic Health Units (BHUs) and Rural Health Centers (RHCs), which are often understaffed and under-resourced. Larger hospitals such as Tehsil Headquarters (THQ) or District Headquarters (DHQ) hospitals are located in semi-urban or urban areas, often far from rural populations. The distance to quality healthcare facilities can range from 50 to 300 kilometers, making it difficult for the rural population to access essential medical services. Moreover, private hospitals are either small individual setups or driven by profit motives, failing to cater to the healthcare needs of the broader population.

Recognizing this gap, the Bin Qutab Foundation established Begum Noor Memorial Hospital (BNMH) in the rural district of Chakwal, bringing top-of-the-line healthcare services to an underserved population. BNMH not only offers medical services but also contributes to medical education and technological advancement in the region. It includes medical training programs and the forthcoming MTECH College of Science and Technology, focused on providing high-quality education in healthcare and science to rural students.

This hospital is a unique institution, providing advanced healthcare services in a region that previously had limited access to specialized medical treatment. Its multi-specialty care, free surgeries for the underprivileged, telemedicine clinics, and other innovative healthcare solutions are transforming lives. However, the real impact of this hospital needs to be quantified to evaluate the socio-economic changes it has brought to the region.

## **Proposed Solution**

To assess the socio-economic impact of Begum Noor Memorial Hospital and its programs, a comprehensive third-party survey is proposed. The survey will be conducted by experts specializing in healthcare impact analysis and rural socio-economic development. This survey will help quantify the tangible and intangible benefits that BNMH has provided to the local community, including improvements in health outcomes, economic opportunities, education, and overall quality of life.

#### **Key Areas of the Study**

Healthcare Accessibility: The survey will analyze how BNMH has improved access to healthcare for rural communities, focusing on the reduction in travel time, the number of patients treated, and the variety of medical services offered. It will also consider the impact of telemedicine services in connecting remote areas to specialized healthcare professionals.





#### **Health Outcomes**

The study will assess the improvement in health metrics, such as reduced mortality rates, increased life expectancy, and better management of chronic diseases due to the hospital's presence. The success of free surgeries for the underprivileged will also be analyzed.

#### **Economic Impact**

BNMH's contribution to the local economy, both directly and indirectly, will be evaluated. This includes job creation in the healthcare sector, the impact on local businesses due to increased traffic from patients, and cost savings for families who no longer have to travel long distances for medical care.

**Education and Training:** The survey will look at how the medical education programs and the establishment of MTECH College have impacted the local population. The role of BNMH in providing career opportunities in healthcare and science and technology for rural youth will be a key focus area.

**Social Empowerment:** The hospital's impact on the social fabric of the community will also be considered. This includes how it has improved the quality of life for disabled persons through rehabilitation services, and its role in empowering women by offering employment opportunities and healthcare services.

**Expected Outcome:** The survey will provide a detailed report on the socio-economic impact of BNMH. It will highlight the areas where the hospital has made a significant difference and recommend areas for further improvement. The findings will be used to inform future healthcare and education programs at BNMH and guide the expansion of similar projects to other rural areas.

In conclusion, Begum Noor Memorial Hospital stands as a beacon of hope for rural communities, addressing a significant healthcare void in the region. This third-party survey will be critical in demonstrating the far-reaching socio-economic benefits of such initiatives and will serve as a model for future rural healthcare interventions in Pakistan.









#### **INNOVATIVE**

#### **CHAKWAL**

## TALAGANG and BEYOND.

(Extension of Services of Health - Education - Livelihood in whole of Potohar Region focusing on Rawalpindi Division districts Jehlum, Rawalpindi, attock and Chakwal including ISLAMABAD RURAL)

#### **Background:**

Bin Qutab Foundation (BQF) has been actively working in health care, education, and livelihood sectors, primarily serving the underprivileged communities in Chakwal and Talagang. Our efforts are now expanding to encompass the entire Potohar region, with a specific focus on the districts of Jehlum, Rawalpindi, Attock, Chakwal, and the rural areas of Islamabad. These regions face similar socioeconomic challenges, particularly in terms of healthcare, education, and unemployment, making it essential for us to broaden our outreach.

#### **Purpose:**

The aim of this initiative is to extend BQF's services across the Potohar region to address critical issues like healthcare access, educational opportunities, and livelihood support. We have already distributed free wheelchairs in parts of Jehlum and Rawalpindi's rural areas, while our mobile hospital is reaching those in need of healthcare services in these locations.

Additionally, we are launching a significant project to address unemployment, focusing on the estimated 700,000 jobless individuals in Chakwal and





Talagang. Our research suggests that there are approximately 2.5 million jobless people across the entire Rawalpindi division. This project seeks to bring together various stakeholders, including local businesses, corporate sectors, non-governmental organizations, chambers of commerce, government bodies, district governments, parliamentarians, noteables, openion movers and the media, to pool resources and create sustainable solutions to the joblessness crisis.

#### **Solution Approach:**

Short-term goals: Immediate focus on vocational training, skill development programs, and small business startups for the unemployed youth.

Long-term vision: Developing a self-sustaining ecosystem of employment through partnerships with the corporate sector and promoting entrepreneurship.

#### **Stakeholders' Roles:**

- 1. Government Bodies: Provide policy support, incentives for businesses, and infrastructure development.
- 2. Local Businesses & Corporate Sector: Invest in skill development programs, offer internships, and fund small enterprises.
- 3. Non-governmental Organizations: Collaborate in training programs and job creation initiatives.
- 4. Media: Amplify the issue and success stories, ensuring awareness and community engagement.

The collective effort of these stakeholders is crucial for creating a framework that provides both immediate relief and long-term sustainability for addressing the unemployment problem in the Potohar region.





# **BANKING DETAILS**

BANK	ACCOUNT TYPE	TITLE	ACCOUNT #	IBAN
MEEZAN BANK LTD	DONATION	BIN QUTAB FOUNDATION	0245-0102865666	PK74 MEZN 0002 4501 0286 5666
UNITED BANK LTD	DONATION	BIN QUTAB FOUNDATION	0962-01128128	PK22 UNIL 0112 0962 0112 8128
BANK ALFALAH ISLAMI	ZAKAT	BIN QUTAB FOUNDATION	5501-5000425583	PK89ALFH5501005000425583

OTHER ACCOUNTS

Jazz Cash 0300-0407082







# BIN QUTAB FOUNDATION

# FINANCIAL STATEMENTS FOR THE YEAR ENDED JUNE 30, 2023

ILYAS SAEED & CO.
CHARTERED ACCOUNTANTS
A member of
mgiworldwide

A - 4, Sea Breeze Hornes, Sher Shah Block, New Garden Town, Lahore. PH: (+92) 042 - 35868849 & 042 - 35861852, FAX: (+92) 042 - 35856145





A-4, Sea Breeze Homes, Shershah Block, New Garden Town, Lahore - Pakistan Phones: (042) 35861852, 35868849 Fax: +92-42-35856145

Fax: +92-42-35856145 E-mail: info@ilyassaeed.com www.ilyassaeed.com

# Ilyas Saeed & Co.

Chartered Accountants

#### INDEPENDENT AUDITOR'S REPORT

#### TO THE MEMBERS OF BIN QUTAB FOUNDATION

#### REPORT ON THE AUDIT OF THE FINANCIAL STATEMENTS

#### Opinion

We have audited the annexed financial statements of Bin Qutab Foundation (the Organization), which comprise the statement of financial position as at June 30, 2023 and the related statement of income and expenditure, the statement of changes in funds, the statement of cash flows for the year then ended, and notes to the financial statements, including a summary of significant accounting policies and other explanatory information, and we state that we have obtained all the information and explanations which, to the best of our knowledge and belief, were necessary for the purposes of the audit.

In our opinion and to the best of our information and according to the explanations given to us, the statement of financial position, statement of income and expenditure, the statement of changes in funds and the statement of cash flows together with the notes forming part thereof conform with the accounting and reporting standards as applicable in Pakistan and give the information required by the Companies Act, 2017 (XIX of 2017), in the manner so required and respectively give a true and fair view of the state of the Organization's affairs as at June 30, 2023 and of the surplus, the changes in funds and its' cash flows for the year then ended.

#### **Basis for Opinion**

We conducted our audit in accordance with International Standards on Auditing (ISAs) as applicable in Pakistan. Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the Financial Statements section of our report. We are independent of the Organization in accordance with the International Ethics Standards Board for Accountants' Code of Ethics for Professional Accountants as adopted by the Institute of Chartered Accountants of Pakistan (the Code) and we have fulfilled our other ethical responsibilities in accordance with the Code. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

#### Information Other Than The Financial Statements And Auditor's Report Thereon

Management is responsible for the other information. The other information comprises of the information included in the annual report but does not include the financial statements and our auditor's report thereon.

Our opinion on the financial statements does not cover the other information and we do not express any form of assurance conclusion thereon. In connection with our audit of the financial statements, our responsibility is to read the other information and, in doing so, consider whether the other information is materially inconsistent with the financial statements or our knowledge obtained in the audit or otherwise appears to be materially misstated. If,







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based on the work we have performed, we conclude that there is a material misstatement of this other information; we are required to report that fact.

We were not provided with any other information; whatsoever, and thus, we have nothing to report in this regard.

#### Responsibilities Of Management And Board of Directors For The Financial Statements

Management is responsible for the preparation and fair presentation of the financial statements in accordance with the accounting and reporting standards as applicable in Pakistan and the requirements of Companies Act, 2017 (XIX of 2017) and for such internal control as management determines is necessary to enable the preparation of the financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, management is responsible for assessing the Organization's ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless management either intends to liquidate the Organization or to cease operations, or has no realistic alternative but to do so.

Board of directors are responsible for overseeing the Organization's financial reporting process.

#### Auditor's Responsibilities For The Audit Of The Financial Statements

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

As part of an audit in accordance with ISAs as applicable in Pakistan, we exercise professional judgment and maintain professional skepticism throughout the audit. We also:

- Identify and assess the risks of material misstatement of the financial statements,
  whether due to fraud or error, design and perform audit procedures responsive to
  those risks, and obtain audit evidence that is sufficient and appropriate to provide a
  basis for our opinion. The risk of not detecting a material misstatement resulting from
  fraud is higher than for one resulting from error, as fraud may involve collusion,
  forgery, intentional omissions, misrepresentations, or the override of internal control.
- Obtain an understanding of the internal control relevant to the audit in order to design
  audit procedures that are appropriate in the circumstances, but not for the purpose of
  expressing an opinion on the effectiveness of the Organization's internal control.
- Evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by management.
- Conclude on the appropriateness of management's use of the going concern basis of accounting and, based on the audit evidence obtained, whether a material uncertainty









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exists related to events or conditions that may cast significant doubt on the Organization's ability to continue as a going concern. If we conclude that a material uncertainty exists, we are required to draw attention in our auditor's report to the related disclosures in the financial statements or, if such disclosures are inadequate, to modify our opinion. Our conclusions are based on the audit evidence obtained up to the date of our auditor's report. However, future events or conditions may cause the Organization to cease to continue as a going concern.

 Evaluate the overall presentation, structure and content of the financial statements, including the disclosures, and whether the financial statements represent the underlying transactions and events in a manner that achieves fair presentation.

We communicate with the Board of Directors regarding, among other matters, the planned scope and timing of the audit and significant audit findings, including any significant deficiencies in internal control that we identify during our audit.

#### Report On Other Legal And Regulatory Requirements

Based on our audit, we further report that in our opinion:

- a) proper books of account have been kept by the Organization as required by the Companies Act, 2017 (XIX of 2017);
- the statement of financial position, the statement of income and expenditure, the statement of changes in funds and the statement of cash flows together with the notes thereon have been drawn up in conformity with the Companies Act, 2017 (XIX of 2017) and are in agreement with the books of account and returns;
- investments made, expenditure incurred and guarantees extended during the year were for the purpose of the Organization's business; and
- d) no zakat was deductible at source under the Zakat and Ushr Ordinance, 1980(XVIII of 1980).

Engagement partner on the audit resulting in this independent auditor's report is Shahid Mehmood.

ILYAS SAEED & CO! Chartered Accountants

Lahore. Date: 06th October , 2023

UDIN: AR202310055062K3rsZy

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#### BIN QUTAB FOUNDATION STATEMENT OF FINANCIAL POSITION AS AT JUNE 30, 2023

NOTE   RUPEES   RUPEES			2023	2022
Property, plant and equipment - unrestricted   International Internati	ASSETS	NOTE	RUPEES	RUPEES
Intangible assets	NON CURRENT ASSETS			
Capital work in progress - unrestricted         6         11,607,571         5,443,086         176,600         176,600         176,600         176,600         128,031,602           CURRENT ASSETS           Loans and advances - unsecured         8         3,018,127         9,824,391         250,189         250,189         12,177,289         17,372,401         22,251,869         10         14,021,907         12,177,289         17,372,401         22,251,869         10         169,056,321         150,283,471         150,283,471         10         169,056,321         150,283,471         10         169,056,321         150,283,471         10         11         10         11         10         11         10         11         10	Property, plant and equipment - unrestricted	4	139,400,883	121,835,318
Capital work in progress - unrestricted         6         11,607,571         5,443,086         176,600           Long term deposits         7         176,600         128,031,602           CURRENT ASSETS           Loans and advances - unsecured         8         3,018,127         9,824,391           Advance income tax         9         332,367         250,189           Cash and bank balances         10         14,021,907         12,177,289           TOTAL ASSETS         169,056,321         150,283,471           FUNDS AND LIABILITIES           General / unrestricted fund         SOCF         160,558,373         135,355,043           CURRENT LIABILITIES           Accrued and other liabilities         11         6,141,517         13,778,428           Short term borrowings         12         2,356,431         1,150,000           8,497,948         14,928,428           CONTINGENCIES AND COMMITMENTS         13         -         -	Intangible assets	5	498,866	576,598
CURRENT ASSETS Loans and advances - unsecured Advance income tax Cash and bank balances  TOTAL ASSETS  FUNDS General / unrestricted fund  CURRENT LIABILITIES  Accrued and other liabilities Short term borrowings  151,683,920 128,031,602  8 3,018,127 9,824,391 250,189 114,021,907 12,177,289 17,372,401 22,251,869  169,056,321 150,283,471  135,355,043  CURRENT LIABILITIES  Accrued and other liabilities 11 6,141,517 13,778,428 1,150,000 8,497,948 14,928,428  CONTINGENCIES AND COMMITMENTS 13		6	11,607,571	5,443,086
CURRENT ASSETS       8       3,018,127       9,824,391         Advance income tax       9       332,367       250,189         Cash and bank balances       10       14,021,907       12,177,289         TOTAL ASSETS       169,056,321       150,283,471         FUNDS AND LIABILITIES         General / unrestricted fund       SOCF       160,558,373       135,355,043         CURRENT LIABILITIES         Accrued and other liabilities       11       6,141,517       13,778,428         Short term borrowings       12       2,356,431       1,150,000         8,497,948       14,928,428    CONTINGENCIES AND COMMITMENTS 13	Long term deposits	7	176,600	176,600
Loans and advances - unsecured Advance income tax			151,683,920	128,031,602
Advance income tax Cash and bank balances  10 14,021,907 17,372,401 22,251,869  TOTAL ASSETS  169,056,321 150,283,471  FUNDS General / unrestricted fund  SOCF 160,558,373 135,355,043  CURRENT LIABILITIES Accrued and other liabilities Short term borrowings 11 6,141,517 13,778,428 1,150,000 8,497,948 14,928,428  CONTINGENCIES AND COMMITMENTS 13	CURRENT ASSETS			
Cash and bank balances       10       14,021,907   12,177,289   17,372,401       12,177,289   22,251,869         TOTAL ASSETS       169,056,321       150,283,471         FUNDS AND LIABILITIES         General / unrestricted fund       SOCF       160,558,373       135,355,043         CURRENT LIABILITIES Accrued and other liabilities       11       6,141,517   13,778,428   1,150,000   1,150,00	Loans and advances - unsecured	8	3,018,127	9,824,391
TOTAL ASSETS  169,056,321  150,283,471  FUNDS AND LIABILITIES  FUNDS  General / unrestricted fund  SOCF  160,558,373  135,355,043  CURRENT LIABILITIES  Accrued and other liabilities Short term borrowings  11  6,141,517  13,778,428  1,150,000  8,497,948  14,928,428  CONTINGENCIES AND COMMITMENTS  13  -  -	Advance income tax	9	332,367	250,189
TOTAL ASSETS    169,056,321   150,283,471	Cash and bank balances	10	14,021,907	12,177,289
FUNDS AND LIABILITIES  FUNDS  General / unrestricted fund  SOCF 160,558,373 135,355,043  CURRENT LIABILITIES  Accrued and other liabilities Short term borrowings  11 6,141,517 13,778,428 1,150,000 2,356,431 1,150,000 8,497,948 14,928,428  CONTINGENCIES AND COMMITMENTS  13			17,372,401	22,251,869
FUNDS General / unrestricted fund  SOCF 160,558,373 135,355,043  CURRENT LIABILITIES Accrued and other liabilities Short term borrowings  11 6,141,517 13,778,428 1,150,000 8,497,948 14,928,428  CONTINGENCIES AND COMMITMENTS  13	TOTAL ASSETS		169,056,321	150,283,471
General / unrestricted fund         SOCF         160,558,373         135,355,043           CURRENT LIABILITIES         11         6,141,517         13,778,428           Short term borrowings         12         2,356,431         1,150,000           8,497,948         14,928,428           CONTINGENCIES AND COMMITMENTS         13         -         -	FUNDS AND LIABILITIES			
CURRENT LIABILITIES           Accrued and other liabilities         11         6,141,517         13,778,428           Short term borrowings         12         2,356,431         1,150,000           8,497,948         14,928,428    CONTINGENCIES AND COMMITMENTS  13	FUNDS			
Accrued and other liabilities  Short term borrowings  11	General / unrestricted fund	SOCF	160,558,373	135,355,043
Short term borrowings         12         2,356,431         1,150,000           8,497,948         14,928,428             CONTINGENCIES AND COMMITMENTS         13         -         -	CURRENT LIABILITIES			
8,497,948 14,928,428  CONTINGENCIES AND COMMITMENTS 13	Accrued and other liabilities	11	6,141,517	13,778,428
CONTINGENCIES AND COMMITMENTS 13	Short term borrowings	12	2,356,431	1,150,000
			8,497,948	14,928,428
TOTAL FUNDS AND LIABILITIES 169,056,321 150,283,471	CONTINGENCIES AND COMMITMENTS	13		
	TOTAL FUNDS AND LIABILITIES		169,056,321	150,283,471

The annexed notes from (1) to (27) form an integral part of these financial statements.

**Chief Financial Officer** 

Chief Executive Officer

Chairman





#### BIN QUTAB FOUNDATION STATEMENT OF INCOME AND EXPENDITURE FOR THE YEAR ENDED JUNE 30, 2023

		2023 RUPEES	2022 RUPEES
PARTICULARS	NOTE	Unrestricted	Unrestricted
INCOME			
Donations / receipts	14	166,680,626	86,954,464
Other receipts	15	334,526	1,796,707
		167,015,152	88,751,171
EXPENDITURE			
Operating expenses	16	(131,172,717)	(81,560,068)
Administrative expenses	17	(19,245,755)	(14,141,649)
Finance costs	18	(255,538)	(265,460)
		(150,674,010)	(95,967,177)
Other income	19	7,231	649,895
SURPLUS / (DEFICIT) FOR THE YEAR		16,348,373	(6,566,111)

The annexed notes from (1) to (27) form an integral part of these financial statements.

Chief Financial Officer

Chief Executive Officer

Chairman

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#### BIN QUTAB FOUNDATION STATEMENT OF CHANGES IN FUNDS FOR THE YEAR ENDED JUNE 30, 2023

PARTICULARS	GENERAL FUND RUPEES	CAPITAL FUND RUPEES	TOTAL RUPEES
	Unrestricted	Unrestricted	Unrestricted
Balance as at July 01, 2021	122,446,053	16,153,061	138,599,114
Addition during the year (in kind)	3,322,040		3,322,040
(Deficit) for the year	(6,566,111)		(6,566,111)
Balance as at June 30, 2022	119,201,982	16,153,061	135,355,043
Balance as at July 01, 2022	119,201,982	16,153,061	135,355,043
Addition during the year (in kind)	5,244,357	3,610,600	8,854,957
Surplus for the year	16,348,373	-	16,348,373
BALANCE AS AT JUNE 30, 2023	140,794,712	19,763,661	160,558,373

The annexed notes from (1) to (27) form an integral part of these financial statements.

**Chief Financial Officer** 

Chief Executive Officer

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Chairman





#### BIN QUTAB FOUNDATION STATEMENT OF CASH FLOWS FOR THE YEAR ENDED JUNE 30, 2023

CASH FLOW FROM OPERATING ACTIVITIES   Surplus / (deficit) for the year   16,348,373   (6,566,111)			2023	2022
CASH FLOW FROM OPERATING ACTIVITIES   Surplus / (deficit) for the year   16,348,373   (6,566,111)     Adjustments for:	PARTICULARS	NOTE	800000000000000000000000000000000000000	RUPEES
Surplus / (deficit) for the year   16,348,373   (6,566,111)   Adjustments for:   Depreciation for the year   12,988,256   11,137,788   77,732   77,222   Loss on disposal of vehicle   3,750   (632,944)   4,015,954   Working capital changes:   Decrease / (Increase) in Loans and advances (Decrease) in Creditors and other accruals   (7,636,912)   (2,862,522)   (2,86		•		
Adjustments for:  Depreciation for the year  Amortization for the year  Amortization for the year  Loss on disposal of vehicle  Cash flow before changes in working capital  Working capital changes:  Decrease / (Increase) in Loans and advances (Decrease) in Creditors and other accruals  Net working capital changes  Cash flow from operations  Taxes paid - net  CASH FLOWS FROM INVESTING ACTIVITIES  Fixed assets purchased  Additions in intangible assets  Proceeds from disposal of vehicle  Capital work in progress  Long term deposits  CASH FLOWS FROM FINANCING ACTIVITIES  Donations received during the year  Increase / (Decrease) in short term financing  Net cash flows from financing activities  Net increase / (decrease) in cash and cash equivalents  Cash and cash equivalents at the start of the year  12,988,256  11,137,788  77,732  77,222  29,418,111  4,015,954  4,015,962,954  4,015,963  11,137,788  11,137,788  11,137,788  11,137,788  11,137,788  11,137,788  11,137,788  11,137,788  11,137,788  11,137,788  11,137,788  11,015,954  11,015,954  11,015,954  11,015,954  11,015,954  11,015,954  11,015,954  11,015,954  11,015,954  11,015,954  11,015,954  11,015,954  11,015,954  11,015,954  11,015,954  11,015,954  11,015,954  11,015,954  11,015,955				
Depreciation for the year	•		16,348,373	(6,566,111)
Amortization for the year Loss on disposal of vehicle Cash flow before changes in working capital Working capital changes: Decrease / (Increase) in Loans and advances (Decrease) in Creditors and other accruals (Decrease) in Creditors and other accruals (Decrease) in Creditors and other accruals (T,636,912) (T,636,912		-		
Loss on disposal of vehicle         3,750         (632,944)           Cash flow before changes in working capital         29,418,111         4,015,954           Working capital changes:         3,750         (632,944)           Decrease / (Increase) in Loans and advances (Decrease) in Creditors and other accruals         6,806,264         (6,721,420)           (Decrease) in Creditors and other accruals         (7,636,912)         (2,862,522)           Net working capital changes         (830,648)         (9,583,942)           Cash flow from operations         28,587,463         (5,567,988)           Taxes paid - net         (82,178)         (41,133)           Net cash flows from operating activities         28,505,286         (5,609,120)           CASH FLOWS FROM INVESTING ACTIVITIES         550,000         1,075,000           Capital work in progress         (6,164,485)         (5,038,160)           Long term deposits         -         (100,000)           Net cash flows from investing activities         (36,722,056)         (6,655,060)           CASH FLOWS FROM FINANCING ACTIVITIES         Donations received during the year         8,854,957         3,322,040           Increase / (Decrease) in short term financing         1,206,431         (725,828)           Net cash flows from financing activities         1,844,618	Depreciation for the year		NAME OF THE PROPERTY OF THE PARTY OF THE PAR	And the state of t
Cash flow before changes in working capital       29,418,111       4,015,954         Working capital changes:       6,806,264       (6,721,420)         (Decrease) in Creditors and other accruals       (7,636,912)       (2,862,522)         Net working capital changes       (830,648)       (9,583,942)         Cash flow from operations       28,587,463       (5,567,988)         Taxes paid - net       (82,178)       (41,133)         Net cash flows from operating activities       28,505,286       (5,609,120)         CASH FLOWS FROM INVESTING ACTIVITIES       Fixed assets purchased       (31,507,571)       (2,464,580)         Additions in intangible assets       -       (127,320)         Proceeds from disposal of vehicle       950,000       1,075,000         Capital work in progress       (6,164,485)       (5,038,160)         Long term deposits       -       (100,000)         Net cash flows from investing activities       (36,722,056)       (6,655,060)         CASH FLOWS FROM FINANCING ACTIVITIES       Donations received during the year       8,854,957       3,322,040         Increase / (Decrease) in short term financing       1,206,431       (725,828)         Net increase / (decrease) in cash and cash equivalents       1,844,618       (9,667,968)         Cash and cash equivalen	Amortization for the year			
Working capital changes:         6,806,264         (6,721,420)           (Decrease) in Creditors and other accruals         (7,636,912)         (2,862,522)           Net working capital changes         (830,648)         (9,583,942)           Cash flow from operations         28,587,463         (5,567,988)           Taxes paid - net         (82,178)         (41,133)           Net cash flows from operating activities         28,505,286         (5,609,120)           CASH FLOWS FROM INVESTING ACTIVITIES         Fixed assets purchased         (31,507,571)         (2,464,580)           Additions in intangible assets         -         (127,320)           Proceeds from disposal of vehicle         950,000         1,075,000           Capital work in progress         (6,164,485)         (5,038,160)           Long term deposits         -         (100,000)           Net cash flows from investing activities         (36,722,056)         (6,655,060)           CASH FLOWS FROM FINANCING ACTIVITIES         Donations received during the year         8,854,957         3,322,040           Increase / (Decrease) in short term financing         1,206,431         (725,828)           Net cash flows from financing activities         10,061,388         2,596,212           Net increase / (decrease) in cash and cash equivalents         1,844,618	Loss on disposal of vehicle			
Decrease / (Increase) in Loans and advances (Decrease) in Creditors and other accruals (7,636,912) (2,862,522) (	Cash flow before changes in working capital		29,418,111	4,015,954
CDECREASE   In Creditors and other accruals   (7,636,912)   (2,862,522)     Net working capital changes   (830,648)   (9,583,942)     Cash flow from operations   28,587,463   (5,567,988)     Taxes paid - net   (82,178)   (41,133)     Net cash flows from operating activities   28,505,286   (5,609,120)     CASH FLOWS FROM INVESTING ACTIVITIES     Fixed assets purchased   (31,507,571)   (2,464,580)     Additions in intangible assets   - (127,320)     Proceeds from disposal of vehicle   950,000   1,075,000     Capital work in progress   (6,164,485)   (5,038,160)     Long term deposits   - (100,000)     Net cash flows from investing activities   (36,722,056)   (6,655,060)     CASH FLOWS FROM FINANCING ACTIVITIES     Donations received during the year   8,854,957   (725,828)     Increase / (Decrease) in short term financing   1,206,431   (725,828)     Net cash flows from financing activities   10,061,388   2,596,212     Net increase / (decrease) in cash and cash equivalents   1,844,618   (9,667,968)     Cash and cash equivalents at the start of the year   12,177,289   21,845,257	Working capital changes:	-		
Net working capital changes         (830,648)         (9,583,942)           Cash flow from operations         28,587,463         (5,567,988)           Taxes paid - net         (82,178)         (41,133)           Net cash flows from operating activities         28,505,286         (5,609,120)           CASH FLOWS FROM INVESTING ACTIVITIES         Fixed assets purchased         (31,507,571)         (2,464,580)           Additions in intangible assets         -         (127,320)           Proceeds from disposal of vehicle         950,000         1,075,000           Capital work in progress         (6,164,485)         (5,038,160)           Long term deposits         -         (100,000)           Net cash flows from investing activities         (36,722,056)         (6,655,060)           CASH FLOWS FROM FINANCING ACTIVITIES         Donations received during the year         8,854,957         3,322,040           Increase / (Decrease) in short term financing         1,206,431         (725,828)           Net cash flows from financing activities         10,061,388         2,596,212           Net increase / (decrease) in cash and cash equivalents         1,844,618         (9,667,968)           Cash and cash equivalents at the start of the year         12,177,289         21,845,257	Decrease / (Increase) in Loans and advances			(6,721,420)
Cash flow from operations         28,587,463         (5,567,988)           Taxes paid - net         (82,178)         (41,133)           Net cash flows from operating activities         28,505,286         (5,609,120)           CASH FLOWS FROM INVESTING ACTIVITIES         Fixed assets purchased         (31,507,571)         (2,464,580)           Additions in intangible assets         -         (127,320)         (127,320)           Proceeds from disposal of vehicle         950,000         1,075,000         (5,038,160)           Capital work in progress         (6,164,485)         (5,038,160)         (5,038,160)           Long term deposits         -         (100,000)         (6,655,060)           Net cash flows from investing activities         (36,722,056)         (6,655,060)           CASH FLOWS FROM FINANCING ACTIVITIES         8,854,957         3,322,040           Increase / (Decrease) in short term financing         1,206,431         (725,828)           Net cash flows from financing activities         10,061,388         2,596,212           Net increase / (decrease) in cash and cash equivalents         1,844,618         (9,667,968)           Cash and cash equivalents at the start of the year         12,177,289         21,845,257	(Decrease) in Creditors and other accruals		(7,636,912)	(2,862,522)
Taxes paid - net         (82,178)         (41,133)           Net cash flows from operating activities         28,505,286         (5,609,120)           CASH FLOWS FROM INVESTING ACTIVITIES         Fixed assets purchased         (31,507,571)         (2,464,580)           Additions in intangible assets         -         (127,320)           Proceeds from disposal of vehicle         950,000         1,075,000           Capital work in progress         (6,164,485)         (5,038,160)           Long term deposits         -         (100,000)           Net cash flows from investing activities         (36,722,056)         (6,655,060)           CASH FLOWS FROM FINANCING ACTIVITIES         Donations received during the year         8,854,957         3,322,040           Increase / (Decrease) in short term financing         1,206,431         (725,828)           Net cash flows from financing activities         10,061,388         2,596,212           Net increase / (decrease) in cash and cash equivalents         1,844,618         (9,667,968)           Cash and cash equivalents at the start of the year         12,177,289         21,845,257	Net working capital changes			(9,583,942)
Net cash flows from operating activities         28,505,286         (5,609,120)           CASH FLOWS FROM INVESTING ACTIVITIES         Fixed assets purchased         (31,507,571)         (2,464,580)           Additions in intangible assets         -         (127,320)           Proceeds from disposal of vehicle         950,000         1,075,000           Capital work in progress         (6,164,485)         (5,038,160)           Long term deposits         -         (100,000)           Net cash flows from investing activities         (36,722,056)         (6,655,060)           CASH FLOWS FROM FINANCING ACTIVITIES         Donations received during the year         8,854,957         3,322,040           Increase / (Decrease) in short term financing         1,206,431         (725,828)           Net cash flows from financing activities         10,061,388         2,596,212           Net increase / (decrease) in cash and cash equivalents         1,844,618         (9,667,968)           Cash and cash equivalents at the start of the year         12,177,289         21,845,257	Cash flow from operations		28,587,463	
CASH FLOWS FROM INVESTING ACTIVITIES  Fixed assets purchased Additions in intangible assets Proceeds from disposal of vehicle Capital work in progress Long term deposits Net cash flows from investing activities  CASH FLOWS FROM FINANCING ACTIVITIES Donations received during the year Increase / (Decrease) in short term financing Net cash flows from financing activities  Net increase / (decrease) in cash and cash equivalents Cash and cash equivalents at the start of the year  1,844,618 1,946,757 1,966,7968 1,844,618 1,844,618 1,844,618 1,844,618 1,844,618 1,844,618 1,844,618 1,844,618 1,844,618 1,844,618 1,844,618 1,844,618 1,844,618 1,844,618	Taxes paid - net			
Cash and cash equivalents   Cash 575,000   (1,075,000   1,075,000   1,075,000   1,075,000   (6,164,485)   (5,038,160)   (100,000)   (1,075,000   1,075,000   (1,075,000   1,075,000   (1,075,000   1,075,000   (1,075,000   1,075,000   (1,075,000   1,000,000)   (1,075,000   (1,075,000   1,000,000)   (1,075,000   (1,075,000   1,000,000)   (1,075,000   (1,075,000   1,000,000)   (1,075,000   (1,075,000   1,000,000)   (1,075,000   (1,075,000   1,075,000   (1,075,000   1,075,000   (1,075,000   1,075,000   (1,075,000   (1,075,000   1,075,000   (1,075,000   (1,075,000   1,075,000   (1,075,	Net cash flows from operating activities		28,505,286	(5,609,120)
Cash and cash equivalents   Cash 575,000   (1,075,000   1,075,000   1,075,000   1,075,000   (6,164,485)   (5,038,160)   (100,000)   (1,075,000   1,075,000   (1,075,000   1,075,000   (1,075,000   1,075,000   (1,075,000   1,075,000   (1,075,000   1,000,000)   (1,075,000   (1,075,000   1,000,000)   (1,075,000   (1,075,000   1,000,000)   (1,075,000   (1,075,000   1,000,000)   (1,075,000   (1,075,000   1,000,000)   (1,075,000   (1,075,000   1,075,000   (1,075,000   1,075,000   (1,075,000   1,075,000   (1,075,000   (1,075,000   1,075,000   (1,075,000   (1,075,000   1,075,000   (1,075,				
Additions in intangible assets  Proceeds from disposal of vehicle Capital work in progress Long term deposits  Net cash flows from investing activities  CASH FLOWS FROM FINANCING ACTIVITIES Donations received during the year Increase / (Decrease) in short term financing Net cash flows from financing activities  Net cash flows from financing activities  Net cash flows from financing activities  Net increase / (decrease) in cash and cash equivalents Cash and cash equivalents at the start of the year  1,2177,289  1,2177,289  1,2177,289  1,2177,289				
Proceeds from disposal of vehicle         950,000         1,075,000           Capital work in progress         (6,164,485)         (5,038,160)           Long term deposits         -         (100,000)           Net cash flows from investing activities         (36,722,056)         (6,655,060)           CASH FLOWS FROM FINANCING ACTIVITIES         Donations received during the year         8,854,957         3,322,040           Increase / (Decrease) in short term financing         1,206,431         (725,828)           Net cash flows from financing activities         10,061,388         2,596,212           Net increase / (decrease) in cash and cash equivalents         1,844,618         (9,667,968)           Cash and cash equivalents at the start of the year         12,177,289         21,845,257			(31,507,571)	5000 32
Capital work in progress       (6,164,485)       (5,038,160)         Long term deposits       (100,000)         Net cash flows from investing activities       (36,722,056)       (6,655,060)         CASH FLOWS FROM FINANCING ACTIVITIES         Donations received during the year       8,854,957       3,322,040         Increase / (Decrease) in short term financing       1,206,431       (725,828)         Net cash flows from financing activities       10,061,388       2,596,212         Net increase / (decrease) in cash and cash equivalents       1,844,618       (9,667,968)         Cash and cash equivalents at the start of the year       12,177,289       21,845,257			-	7
CASH FLOWS FROM FINANCING ACTIVITIES			5-900 - 5-900	
Net cash flows from investing activities         (36,722,056)         (6,655,060)           CASH FLOWS FROM FINANCING ACTIVITIES         Donations received during the year         8,854,957         3,322,040           Increase / (Decrease) in short term financing         1,206,431         (725,828)           Net cash flows from financing activities         10,061,388         2,596,212           Net increase / (decrease) in cash and cash equivalents         1,844,618         (9,667,968)           Cash and cash equivalents at the start of the year         12,177,289         21,845,257			(6,164,485)	
CASH FLOWS FROM FINANCING ACTIVITIES  Donations received during the year  Increase / (Decrease) in short term financing  Net cash flows from financing activities  Net increase / (decrease) in cash and cash equivalents  Cash and cash equivalents at the start of the year  12,177,289  23,322,040 (725,828) 1,206,431 (725,828) 2,596,212	Long term deposits		-	
Donations received during the year   8,854,957   3,322,040	Net cash flows from investing activities		(36,722,056)	(6,655,060)
Donations received during the year   8,854,957   3,322,040				
Increase / (Decrease) in short term financing         1,206,431         (725,828)           Net cash flows from financing activities         10,061,388         2,596,212           Net increase / (decrease) in cash and cash equivalents         1,844,618         (9,667,968)           Cash and cash equivalents at the start of the year         12,177,289         21,845,257		i r		2 222 242
Net cash flows from financing activities10,061,3882,596,212Net increase / (decrease) in cash and cash equivalents1,844,618(9,667,968)Cash and cash equivalents at the start of the year12,177,28921,845,257				
Net increase / (decrease) in cash and cash equivalents Cash and cash equivalents at the start of the year 1,844,618 (9,667,968) 21,845,257				
Cash and cash equivalents at the start of the year 12,177,289 21,845,257	Net cash flows from financing activities		10,061,388	2,596,212
Cash and cash equivalents at the start of the year 12,177,289 21,845,257	Net increase / (decrease) in cash and cash equivalen	ts .	1,844,618	(9,667,968)
				21,845,257
		EAR		

The annexed notes from (1) to (27) form an integral part of these financial statements.

Chief Financial Officer

Chief Executive Officer

Chairman