



Annual General Meeting Report 2003

IMPROVING PATIENT OUTCOMES: 

 *Moving Research Into Practice*

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Canadian Institute for the Relief of Pain and Disability
Annual General Meeting
Monday November 24, 2003

Meeting Venue: PriceWaterhouseCoopers
Sinclair Room, 7th floor
250 Howe Street
Vancouver

CIRPD Annual General Meeting

1. Minutes of Annual General Meeting, February 11, 2003
2. President's Annual Report
3. Executive Director's Annual Report
4. Research Committee's Annual Report
5. Treasurer's Annual Report
6. Nomination Committee's Report
7. Election of Directors
8. Annual Review Financial Statements for the Year Ending June 30, 2003

President's Report

Dr. Jack Richman

This past year CIRPD has been engaged in a number of exciting new initiatives. These include:

- A new research partnership with AUTO21, a national research initiative supported by the Government of Canada through the Networks of Centres of Excellence Directorate and more than 120 industry, government and institutional partners. The Network currently supports over 230 top researchers working at more than 35 academic institutions, government research facilities and private sector research labs across Canada and around the world. As both CIRPD and AUTO21 share an interest in cultivating new scientists/engineers in the automotive sector to address issues of mitigation of injury arising from automotive vehicle collisions, AUTO21 has agreed to match funding we have secured from The Woodbridge Group.
- PMRF/CIRPD applied and received a grant from the Labour Management Partnerships Programs (LMPP), Government of Canada on a matching grant basis to support a project entitled *Enhancing Stakeholders Knowledge and Skills in Disability Prevention, Detection and Management* which has initiated a national Canadian Institutes of Health Research (CIHR), Institute for Musculoskeletal Health and Arthritis –CIHR, Ontario Workplace Safety & Insurance Board, Saskatchewan Workers Compensation Board, the Workers Compensation Board of British Columbia and the BC Gaming Commission who provided funding support towards the symposia and this initiative. The results of this discussion will be completed in December 2003.
- One of the CIRPD's goals is to translate research into practice – an exciting initiative is CIRPD's work with the Massage Therapists Association of British Columbia which is creating evidence-informed assessment and management guidelines to help therapists take advantage of current research to improve patient health outcomes.
- Feasibility study to create a province-wide multidisciplinary educational intervention to enhance knowledge and skills of all practitioners treating patients presenting with acute and sub-acute low back pain.

Working with Dr. Dan Costa as chair (and myself as co-chair) CIRPD held a very successful international conference in Markham Ontario in September 2002 with many professional organization sponsors and partners. Later in the year, June 2003 co-hosted a regional conference, *Disability Management and Return To Work* with the Canadian Association of Disability Management Coordinators.

Concurrent with our name change to the *Canadian Institute for the Relief of Pain and Disability* is a need to focus on issues of pain relief, what works and what does not; what causes disability and the difference between true disability and perceived disability, which is still disabling but amenable to treatment. This work is also consistent with the

mandate of the Cochrane Collaboration, with whom we are now associated. I look forward as your President to focus on research and educational activities that bring us closer to the relief of pain and the prevention of disability.

I would like to thank the work of its board and committee members and the many health professionals who volunteer their time to work on CIRPD activities. I would like to thank the ongoing leadership of Dr. Marc White, our executive director, and congratulate him on the successful completion of his doctoral work. Sheila Kerr has been working with Dr. White for the past two years and is contributing her knowledge and skills to a number of CIRPD projects. Dr. Santiago Toro Posada and Ana Marie Butcher have recently left CIRPD for new adventures. Dr. Toro Posada is working full-time with the Division of Educational Support and Development at the University of British Columbia and continues to do some consulting work and volunteer work for CIRPD. Ana Marie Bucher is pursuing a new career track. Ana Marie was with us for many years and we wish her well with her future plans.

Executive Director's Report

Dr. Marc White

The Canadian Institute for the Relief of Pain and Disability (CIRPD) is involved in a number of initiatives to improve the quality of care for people suffering from chronic pain conditions. Some of our current projects are:

International Symposia and Regional Conference

Considering CIRPD has only existed since 1985, we have made some major steps in bringing health care professionals together to collaborate in the search for best practices to improve patient health care. We have held 11 international symposia and many regional conferences, bringing together over 4,000 health professionals from 30 countries. Conferences have been held at the University of BC, University of Toronto, University of Oxford, as well as in Prague, Czech Republic.

Our last international symposia: *Symptom, Diagnostic and Disability Validity: Improving Patient Outcomes* was held in Toronto/Markham, September 26 - 29, 2002.

In June 2003, we held a regional conference in association with the Canadian Association of Disability Management Coordinators, entitled: *Disability Management and Return to Work*. This conference was held at the Workers Compensations Board of British Columbia.

Doctoral and Fellowship Program – Building Research Capacity

Last year, building on a special partnership with the **Canadian Institutes for Health Research**, and **The Woodbridge Group**, CIRPD created a research training program to help cultivate and build research capacity in the area of musculoskeletal medicine. Topics that received funding include:

- *Mitigating Occupant Injury in Motor Vehicle Accidents*: Crash prevention, traffic safety and education, injury prevention/reduction, automobile safety, engineering and design, crash dynamics and injury exposure.
- *Prevention of Disability*: Community intervention, case management, disability adjudication, compensation, cost/benefit analysis, return-to-work, and insurance.
- *Enhancements in Diagnosis and Management*: Evaluation of diagnosis and treatment programs of whiplash-associated disorders, medical interventions, physical therapies, treatment modalities, exercise and interdisciplinary approaches, prognostic indicators, and prevention of chronicity.

More information about each topic can be found on our website: www.cirpd.org

This year we are pleased to announce that **Auto21**, a national research initiative supported by the Government of Canada through the Networks of Centres of Excellence Directorate and more than 120 industry, government and institutional partners, has joined this research initiative to help build research capacity. It is clear to all partners that the best way to reduce pain and disability from musculoskeletal injuries arising from motor vehicle accidents is through improvements in vehicle safety.

CIRPD has funded over 23 research projects and 12 awards for excellence. Thanks to the support of The Woodbridge Group, Insurance Corporation of British Columbia, State Farm Insurance, and the Canadian Institutes for Health Research, CIRPD has directed over one million dollars to fund practical “real world” research projects.

Labour Management Partnership Program

Thanks to the support of the Labour Management Partnership Program, a federal program of the Ministry of Labour, and the Canadian Institutes for Health Research, CIRPD has conducted a series of focus groups and information gathering to: (a) foster advances in the assessment of symptom diagnostic and disability validity with the aim of improving patient/worker health outcomes, (b) create an opportunity to discuss challenges and potential solutions for improving labour-management issues related to disability prevention, detection and management from an international perspective, (c) facilitate communication among labour, management and researchers to better identify real world issues and identify issues of common information needs, (d) expose stakeholders to current evidence-based research on this topic, and, (e) facilitate a number of focus groups among stakeholders to identify research needs, challenges with current research, and the creation of possible strategies for creating a consensual action plan to address knowledge gaps and identified challenges. This project will be completed at the end of 2003. Focus groups have been held in Toronto and Vancouver together with survey responses from across Canada from health professionals and consumers.

Knowledge Translation Developing a New Model for Knowledge Uptake and Utilization

From 1995 to 1999, CIRPD created the largest educational intervention in British Columbia to enhance the knowledge and skills of family physicians and emergency physicians in the assessment and management of whiplash, called the BC Whiplash Initiative (BCWI). Partners included the BC College of Family Physicians of Canada, UBC Division of Continuing Medical Education, UBC Department of Family Practice - Rural Education Training and Family Practice Residency Program, and UBC Undergraduate Medical Education. The Insurance Corporation of British Columbia provided funding for the project by way of an educational grant to CIRPD, subject to the Canadian Medical Association's guidelines on industry-sponsored continuing medical education (CME). The program was developed by peer-respected physicians for physicians.

Based on our experience with the BCWI, including the publication of award winning research papers, posters, and presentations at international and national conferences, CIRPD has become recognized as an organization committed to the effective dissemination of knowledge to all stakeholders. Our executive director, Dr. Marc White, in May 2003 completed his doctoral work entitled: *Toward an evidence-informed, theory-driven model for continuing medical education (CME)*. The thesis used the BCWI as a case study to explore the use of different conceptual models to help planners of CME plan more effective educational interventions resulting in changes in physician behaviour and patient health outcomes.

Improving the Quality of Patient Care Linking Research to Clinical Practice of Massage Therapists

For the past year CIRPD has worked with the Massage Therapists Association of British Columbia on an ambitious program to improve the quality of care of patients through the application of current research.

This three year comprehensive project will result in the following outcomes: (i) the creation of evidence-informed guidelines to assist massage therapists in the assessment and management of patients with various musculoskeletal conditions (back pain, neck pain, shoulder pain etc.) to ensure patients' are receiving optimum care, (ii) the publication of a series of articles to help therapists better understand research concepts and use reliable and valid outcome measures to better document changes in patients health status, (iii) the development evidence-informed training modules to train therapists in the application of these guidelines and tools, (iv) the creation of a community of clinician-based researchers to further research investigating the efficacy of massage practice, and, (vi) to facilitate changes in therapist training promoting the use of evidence-based research and creating a revitalised culture of lifelong learning in the profession.

To date CIRPD has created evidence-informed guidelines for the assessment and treatment of patients with osteoarthritis working with The Arthritis Society and The Arthritis Research Centre of Canada, back pain guidelines and we are currently working on neck pain guidelines. This has been a very exciting project.

Low Back Pain Project

CIRPD received a small grant from Workers Compensation Board of BC to support preliminary work to assess the feasibility of creating a province-wide, multidisciplinary low back pain initiative. The initial goal of the project is to create a common set of guidelines on the assessment and management of acute and sub-acute low back pain using findings from recent systematic reviews. All health professional groups working with back pain patients have agreed to participate in this initiative. We are currently seeking funding to support the planning, implementation and program evaluation of the guideline development process.

Improving Chronic Pain Services in the Lower Mainland

CIRPD, in partnership with The Arthritis Society, UBC School of Nursing and Kwantlen College – The Wellness Centre, held a public forum in the summer of 2001 to (i) identify issues and service gaps perceived by people with chronic pain and health care providers, and (ii) to identify client-based solutions to better meet the actual needs of the target population. Findings arising from this needs assessment were recently published in the journal, *Health Expectations*.¹ The final report for the project was distributed to all stakeholders including the South Fraser Region Health Board.

¹ Dewar A., White M., Toros Posada S., Dillon W. Using Nominal Group Technique to Assess Chronic Pain Patients' Perceived Challenges and Needs to Enhance Better Targeted Services in a Community Health Region, *Health Expectations*, 2003; 6:1 pp. 44-52..

As a result of this project CIRPD has developed a new partnership and research initiative with The Arthritis Society - BC and Yukon Division. The study will compare two different methods of training volunteer leaders to run a specific chronic pain self-management program (comparing those trained using traditional face-to-face workshops versus leaders trained to using a web-based technology and videotape). The educational program is based on the work of Kate Lorig² and fellow researchers at Stanford University who created and evaluated a self-management program for people with chronic diseases. They found program participants at one year experienced statistically significant improvements in health behaviours (exercise, cognitive symptom management, and communication with physicians), self-efficacy, and health status (fatigue, shortness of breath, pain, role function, depression, and health distress) and had fewer visits to the emergency department. The Arthritis Society modified the program to reflect the needs of people with chronic pain conditions. This study will be completed in 2004. We thank The United Way in the Lower Mainland who provided CIRPD with funding for this project. Other project supporters included Workers Compensation Board of BC, Insurance Corporation of BC, and BC Gaming Commission, Province of BC. The study has already resulted in an additional self-management educational program in the South Fraser Health Region.

Chronic Pain Support Services

CIRPD provides Chronic Pain Support Services for people living with chronic pain by promoting self-management, job training, and workplace accommodation in Vancouver and the lower mainland. CIRPD has also developed some web-based educational resources to extend these services and resources around the province and across Canada. With the financial support of BC Gaming Commission, Province of British Columbia, Industrial Alliance Pacific, and charitable donations, CIRPD can provide these and other valuable support services.

Publication Information

Through the creation of international and regional symposia, the Woodbridge Grants and Award Program, and CIRPD research and program evaluation activities, CIRPD has contributed to the creation of new knowledge and its dissemination. We are currently updating the list of CIRPD publications on our website. Please contact our office if you would like to receive a complete list of publications.

² Lorig KR, Sobel DS, Ritter PL, Laurent D, Hobbs M. Effect of a self-management program on patients with chronic disease. *Eff Clin Pract.* 2001 Nov-Dec;4(6):256-62.

Treasurer Annual Report July 1, 2002 – June 30, 2003

Sue Tsiang

The highlight for this year was our new partnership with the Canadian Institute for Health Research and Auto21 National Centre of Excellence. This partnership has enabled the charity to match funds for The Woodbridge Grants and Award Program with the potential for 3:1 matching. Our grants and award program is one the Institute's most successful fundraising activities. We greatly appreciate The Woodbridge Group's sustaining support for this exciting program.

This year we also partnered with the Canadian Association of Disability Management Coordinators and held a successful symposium in June. With the loss of Gaming funds due to the closure of Tri-City Bingo and insufficient project funding support CIRPD is not able to maintain current operations and overhead. In the short term to remedy this problem CIRPD is moving to smaller offices and has reduced office staff. Working with our corporate partners we are developing innovative gift strategy plans to secure core funding. Project applications are being prepared and submitted for the Spring of 2004.

This year the Board of Directors appointed Marsh & Marsh to do an annual review of our financial statements.

CIRPD must continue to develop other funding sources to maintain current services and activities and build a stronger infrastructure.

Research Report

Dr. Jack Richman, Research Chair

As I mentioned in my President's Report this year CIRPD partnered with AUTO21 part of the Centres of Excellence. I am pleased to announce two winners to-date.

Grant Winners To Date:



Rita Turchi a student at the University of Windsor completed her BSc in Mechanical Engineering (with the Materials Option) at the University of Windsor in August of 2001. She has been awarded a number of scholarships for her educational achievements including a Natural Science and Engineering Research Council of Canada Postgraduate Scholarship, Automotive Women's Alliance Scholarship, and a Community Scholars Award from the University of Windsor. She is currently conducting research in the area of automotive crashworthiness where she is investigating, using finite element methods, the safety of children during automotive crash. Rita has also been involved with other crashworthiness investigations including the use of aluminum foams as potential energy absorbing structures under impact conditions. Rita hopes to finish her MSc. by the end of this summer and begin her PhD at the University of Windsor continuing her research in child safety.

Research Title: Injury Potential for Children in Vehicle Crash With Three and Five Point Child Restraint Safety Systems

The focus of the proposed research program deals with child safety. Within this program an investigation into the potential and severity of child injury specifically focusing on the head, neck, and chest will be considered. Using a detailed and calibrated finite element (FE) model of a three year old Hybrid III child mannequin (crash test dummy) an investigation into the kinetics and kinematics which the numerical model of the child will experience during frontal vehicle crash will be conducted. Acceleration data from experimentally crashed vehicles (in frontal collisions) will be used to prescribe acceleration pulses which a child restraint system could potentially be exposed to during a crash. A numerical model of the restraint system, which will be developed within the research project, combined with the FE model of the child crash test dummy, will be used to investigate neck forces and moments, the head injury criterion, and chest forces and deflection for the prescribed acceleration pulse. Three point and five point restraint systems in both forward and rearward facing configurations will be considered. The anticipated outcomes of the research project will provide suggested and improved methods of constraining young children in vehicles, consider the severity and likelihood of injury with an attempt to quantify the potential economic burden which might result from the crashes investigated in this research, and to possibly develop or further improve restraining systems available in child safety seats. The funding from this research proposal will be used to support and train highly qualified personnel (HQP) who will conduct research outlined in this proposal.



Ali Asadkarami completed his BSc in Mechanical Engineering with a specialty in solid body mechanics at the Amirkabir University of Technology in September, 2000 – graduating second in his class. Ali then went on to complete his M.Sc. in Mechanical Engineering in December, 2002 in the area of applied mechanics at the Iran University of Science and Technology. He was honoured as the best student among 25 students in his M.Sc. program. Ali is currently in a PhD candidate in the Department of Mechanical

Engineering at the University of British Columbia conducting research in the area of automotive safety and crashworthiness. As a sponsored participant of the AUTO21 Network Centres of Excellence, he is working as part of a research team to investigate occupant safety during side impacts using numerical simulation and structural (i.e. finite element) modeling techniques. This work is directed towards providing a better understanding of how injuries occur during these types of collisions by analyzing the contributions and effects of vehicle structure, occupant dynamics and safety restraints during the event. Ali has previously utilized numerical modeling techniques in his M.Sc. program applied to fracture mechanics problems (subsequently published) and is now applying this knowledge with a goal to enhance vehicle safety. Ali plans to finish his Ph.D. by the end of 2006.

Research Title: NCE- Crash Investigations: Outcomes for Vehicle Designs

Side impact collision causes a high amount of fatalities and injuries in the world each year. In order to reduce the severity of collision, it is needed to increase our understanding of how vehicles and their occupants behave in side impact crashes, so as to develop better design for vehicles.

In an effort to improve this knowledge, we are going to develop a numerical model to assess the side impact collision. This numerical model which would be developed using established computer software (DYNA3D), will involve modelling the dynamic impact and deforming structures in the crash as well as modelling the vehicle occupant. In this model the efficiency of various counter measures like side impact airbags would be evaluate in side impact crashes. Then the occupant data will be compared with side impact injury criterion.

Finally, simulation data will be compared to the field data obtained from real crashes to validate the model and increase our understanding of the details of such crashes.

Nomination Committee Report

Tammy Hughes & Bill Dyer

The following individuals have agreed to be nominated to the CIRPD Board

Mark Lodder
Simon Mak

The following directors have agreed, subject to re-election, to complete their second year term on the Board: Sue Tsiang, Tammy Hughes

The following people have agreed to stand for re-election.

Mary Ballard
Ken Craig,
David Ewert
Jack Richman
Joseph Stern
Bill Dyer

We would like to thank outgoing Board Members: John Gane, Barry Appleton, Scott Brown, Mike Carroll and Ted Hunt for their efforts on behalf of CIRPD.

Election of Directors

Nominations were called from the floor. Gloria Gilbert was nominated by Ken Craig. There were no further nominations.

M/S/C that all nominated members be appointed to the Board of Directors.

CANADIAN INSTITUTE FOR THE RELIEF OF
PAIN AND DISABILITY

(Note 9)

FINANCIAL STATEMENTS

JUNE 30, 2003

(Unaudited)

REVIEW ENGAGEMENT REPORT

To the Members of the Canadian Institute for the Relief of Pain and Disability:

We have reviewed the statement of financial position of the Canadian Institute for the Relief of Pain and Disability as at June 30, 2003 and the statement of operations and changes in net assets and cash flows for the year then ended. Our review was made in accordance with Canadian generally accepted standards for review engagements and accordingly consisted primarily of enquiry, analytical procedures and discussion related to information supplied to us by the company.

A review does not constitute an audit and consequently we do not express an audit opinion on these financial statements.

Based on our review, nothing has come to our attention that causes us to believe that these financial statements are not, in all material respects, in accordance with Canadian generally accepted accounting principles. It should be noted that the comparative figures in these financial statements were prepared on an audit basis by another firm of chartered accountants.

Vancouver, B.C.
October 9, 2003

Chartered Accountants

CANADIAN INSTITUTE FOR THE RELIEF OF PAIN AND DISABILITY

(Note 9)

STATEMENT OF FINANCIAL POSITION AS AT JUNE 30, 2003

(Unaudited)

	<u>2003</u>	<u>2002</u>
ASSETS		
Current Assets		
Cash	\$ 17,968	\$ 17,341
Accounts receivable	5,405	2,911
Inventory	-	1,364
Prepaid expenses	<u>3,181</u>	<u>17,674</u>
	26,554	39,290
Restricted Cash - (Note 7)	79,214	273,812
Capital Assets - (Note 3)	<u>9,236</u>	<u>12,508</u>
	<u>\$ 115,004</u>	<u>\$ 325,610</u>
LIABILITIES		
Current Liabilities		
Bank indebtedness - (Note 5)	\$ -	\$ 20,000
Accounts payable	3,215	8,396
Wages payable	9,389	8,235
Unearned revenues	-	51,253
Bank loan - current portion	<u>-</u>	<u>4,727</u>
	12,604	92,611
Accrued Interest Payable - (Note 4)	14,408	14,408
Deferred Contributions - (Note 7)	<u>79,214</u>	<u>273,812</u>
	<u>106,226</u>	<u>380,831</u>
NET ASSETS		
Net Assets		
Invested in capital assets	9,236	12,508
Unrestricted	<u>(458)</u>	<u>(67,729)</u>
	<u>8,778</u>	<u>(55,221)</u>
	\$ 115,004	\$ 325,610

Approved by the Directors

Director

Director

The accompanying notes are an integral part of the financial statements.

CANADIAN INSTITUTE FOR THE RELIEF OF PAIN AND DISABILITY

(Note 9)

STATEMENT OF OPERATIONS AND CHANGES IN FUND BALANCES

FOR THE YEAR ENDED JUNE 30, 2003

(Unaudited)

	<u>2003</u>	<u>2002</u>
Revenue		
Donations	\$ 11,703	\$ 20,793
Fund raising - (Note 6)	37,131	37,252
Grants	99,128	47,652
Interest and other income	13,439	6,185
Symposiums	<u>146,346</u>	<u>-</u>
	<u>307,747</u>	<u>111,882</u>
Expenditures		
Accounting and legal	5,296	11,067
Amortization	3,272	4,502
Bank charges and interest	3,157	3,952
Consulting, wages and benefits	118,732	113,383
Insurance	3,574	3,108
Office and sundry	6,399	6,844
Postage and printing	4,137	4,873
Rent	24,050	25,622
Symposiums	70,266	-
Telephone and utilities	<u>4,865</u>	<u>3,895</u>
	243,748	177,246
Capital assets written off	<u>-</u>	<u>3,057</u>
	<u>243,748</u>	<u>180,303</u>
Excess (deficiency) of revenue over expenditures for year	<u>\$ 63,999</u>	<u>\$ (68,421)</u>

The accompanying notes are an integral part of the financial statements.

CANADIAN INSTITUTE FOR THE RELIEF OF PAIN AND DISABILITY

(Note 9)

STATEMENT OF CHANGES IN NET ASSETS

FOR THE YEAR ENDED JUNE 30, 2003

(Unaudited)

	Invested in Capital Assets	Unrestricted	2003 Total	2002 Total
	<u> </u>	<u> </u>	<u> </u>	<u> </u>
Balance, beginning of year	\$ 12,508	\$ (67,729)	\$ (55,221)	\$ 58,200
Excess (deficiency) of revenue over expenditures	-	63,999	63,999	(68,421)
Invested in capital assets	(3,272)	3,272	-	-
Endowment investment	<u>-</u>	<u>-</u>	<u>-</u>	<u>(45,000)</u>
Balance, end of year	<u>\$ 9,236</u>	<u>\$ (458)</u>	<u>\$ 8,778</u>	<u>\$ (55,221)</u>

The accompanying notes are an integral part of the financial statements.

CANADIAN INSTITUTE FOR THE RELIEF OF PAIN AND DISABILITY

(Note 9)

STATEMENT OF CASH FLOWS
FOR THE YEAR ENDED JUNE 30, 2003
(Unaudited)

	<u>2003</u>	<u>2002</u>
Cash (used in) provided by operating activities		
Excess (deficiency) of revenue over expenditures for year	\$ 63,999	\$ (68,421)
Items not affecting cash		
Amortization	3,272	4,502
Capital assets written off	<u>-</u>	<u>3,057</u>
	67,271	(60,862)
Net change in non-cash working capital balances		
Accounts receivable	(2,494)	584
Inventory	1,364	-
Prepaid expenses	14,493	(12,244)
Accounts payable	(5,181)	8,090
Wages payable	1,154	8,235
Executive remuneration payable	-	(5,793)
Unearned revenues	<u>(51,253)</u>	<u>51,253</u>
	25,354	(10,737)
Decrease in deferred contributions related to operations and research	<u>(194,598)</u>	<u>(28,889)</u>
	<u>(169,244)</u>	<u>(39,626)</u>
Cash provided by (used in) financing activities		
Bank loan/indebtedness	(24,727)	11,178
Accrued interest payable	<u>-</u>	<u>1,346</u>
	<u>(24,727)</u>	<u>12,524</u>
Cash used in investing activities		
Capital asset additions, net	<u>-</u>	<u>(2,213)</u>
Decrease in cash	(193,971)	(29,315)
Cash, at beginning of year	<u>291,153</u>	<u>320,468</u>
Cash, at end of year	<u>\$ 97,182</u>	<u>\$ 291,153</u>
Cash, is comprised of:		
Cash	\$ 17,968	\$ 17,341
Restricted cash	<u>79,214</u>	<u>273,812</u>
	<u>\$ 97,182</u>	<u>\$ 291,153</u>

The accompanying notes are an integral part of the financial statements.

CANADIAN INSTITUTE FOR THE RELIEF OF PAIN AND DISABILITY

(Note 9)

NOTES TO FINANCIAL STATEMENTS

JUNE 30, 2003

(Unaudited)

Note 1 Purpose of the Foundation

The Foundation's objectives are:

- (1) To support public and professional education in the prevention, treatment and management of musculoskeletal conditions.
- (2) To facilitate and/or fund well designed cross-discipline research in the following areas:
 - a) advances in injury prevention;
 - b) effective diagnosis, and management;
 - c) reliable and valid measurement tools to evaluate and improve assessment, outcome prediction, and future research;
 - d) effective research dissemination and utilization practices;
 - e) reduction of impairment and disability; and
 - f) efficacy of complementary and alternative therapies.
- (3) To become a Centre of Excellence for research dissemination and utilization to the public and other stakeholders;
- (4) To coordinate strategic planning among all stakeholders to improve research coordination;
- (5) To identify and fill gaps in knowledge through the development and implementation of appropriate action plans for future research; and
- (6) To facilitate cross discipline cooperation and collaboration.

The Foundation was incorporated under Part II of the Canada Corporations Act and is a registered charitable organization for income tax purposes.

Note 2 Significant Accounting Policies

(a) Revenue recognition

The Foundation follows the deferral method of accounting for contributions. Restricted contributions are recognized as revenue in the year in which the related expenses are incurred. Unrestricted contributions are recognized as revenue when received or receivable if the amount to be received can be reasonably estimated and collection is reasonably assured.

CANADIAN INSTITUTE FOR THE RELIEF OF PAIN AND DISABILITY

(Note 9)

NOTES TO FINANCIAL STATEMENTS

JUNE 30, 2003

(Unaudited)

Note 2 Significant Accounting Policies - (continued)

(b) Inventory

Inventory is valued at the lower of cost or net realizable value on a first-in, first-out basis.

(c) Capital Assets

Capital assets are recorded at cost. Amortization is provided annually at rates calculated to write off these assets over their estimated useful lives on a declining basis as follows:

Computer	30%
Furniture and equipment	20%

Note 3 Capital Assets

	<u>Cost</u>	<u>Accumulated Amortization</u>	<u>Net Book Value 2003</u>	<u>Net Book Value 2002</u>
Computer	\$ 34,462	\$ 29,070	\$ 5,392	\$ 7,703
Furniture and equipment	<u>26,076</u>	<u>22,232</u>	<u>3,844</u>	<u>4,805</u>
	<u>\$ 60,538</u>	<u>\$ 51,302</u>	<u>\$ 9,236</u>	<u>\$ 12,508</u>

Note 4 Accrued Interest Payable

This amount represents the unpaid portion of interest accrued on amounts owing to an executive of the Foundation. The balance is payable at the discretion of the directors.

Note 5 Bank Indebtedness

There is a credit facility from a Chartered Bank with a maximum limit of \$ 35,000. It bears interest at prime rate plus 1.8% and it is secured by properties of the Foundation pursuant to a general security agreement. This loan is repayable on demand.

CANADIAN INSTITUTE FOR THE RELIEF OF PAIN AND DISABILITY

(Note 9)

NOTES TO FINANCIAL STATEMENTS

JUNE 30, 2003

(Unaudited)

Note 6 Fund Raising Activities

Fund raising activities consist of weekly bingo, special events and grants revenue.

Revenues and related expenditures, in connection with weekly bingo and special events during the year, are shown below:

	<u>2003</u>	<u>2002</u>
Gaming Fund - Bingo	\$ 37,131	\$ 37,244
Other fund raising revenues	-	79
Fund raising expenditures	<u>-</u>	<u>(71)</u>
	<u>\$ 37,131</u>	<u>\$ 37,252</u>

Note 7 Deferred Contributions

Deferred contributions represent unspent resources externally restricted for research purposes. These resources will be used in subsequent periods. Accordingly, an equivalent amount of cash has been reclassified and disclosed as a long-term asset.

Its income can be distributed for use by the Foundation without restrictions.

Note 8 Commitments

The Foundation rents its premises under a lease agreement which expires on April 30, 2006. The basic annual rents are as follows:

2004	\$ 16,370
2005	17,109
2006	14,770

The Foundation is also required to pay common area maintenance on a monthly basis. This amount is estimated to be approximately \$ 1,100 per month.

Note 9 During the year the Foundation changed it's name from Physical Medicine Research Foundation to Canadian Institute for the Relief of Pain and Disability.

