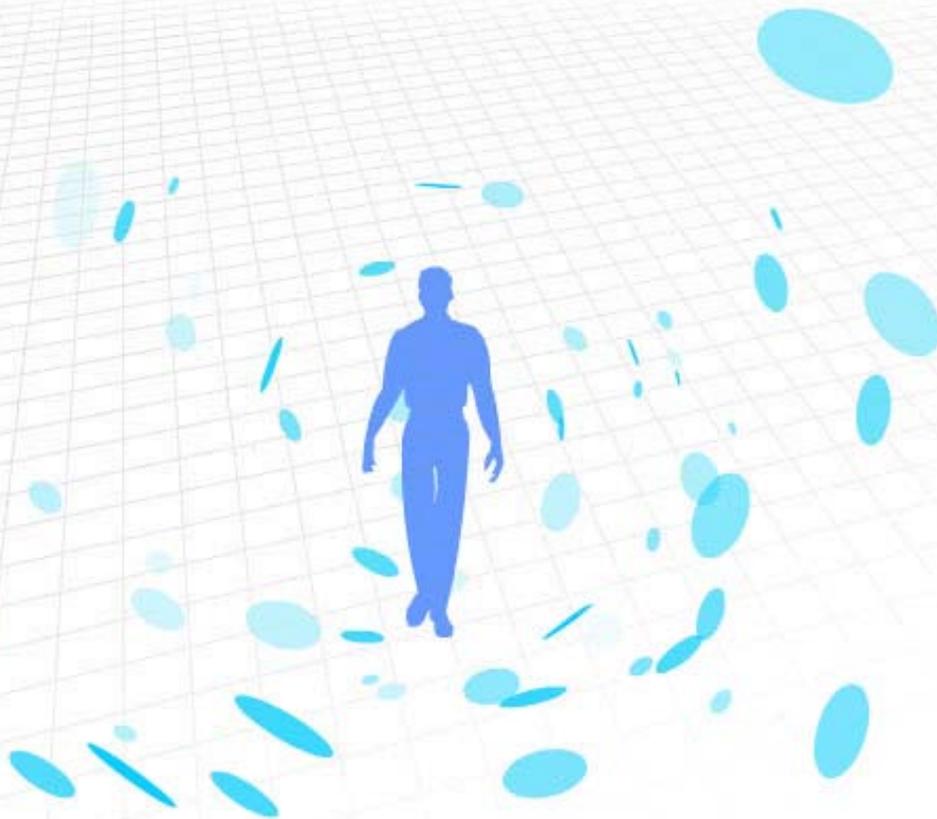




Canadian Institute for the Relief of Pain and Disability



Annual Report 2004



July 1, 2003 – June 30, 2004

Annual General Meeting November 8, 2004

PricewaterhouseCoopers

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President's Report

Jack Richman MD



Dr. Jack Richman

This past year has been a whirlwind of activity and adventures. I would like to firstly congratulate Dr. Marc White on the successful completion of his doctoral work last year. His thesis entitled, *Toward an evidence-informed, theory-driven model for continuing medical education*, was well targeted to the interests of CIRPD in creating more effective ways in reducing the gap between what we know from research and what is taught and practiced. In February 2004, CIRPD completed and released its report, *Enhancing Stakeholders' Knowledge and Skills in Disability Prevention, Detection and Management* (available on our website). The report highlighted the need to

create healthy, satisfying, safe and accommodating workplaces as a pre-requisite for creating effective disability prevention and management programs. The report also identified research priorities and recommendations. Please visit our website at www.cirpd.org to download a copy of the report.

As part of CIRPD's efforts to bridge the gap between research and public education, we are also creating new educational resources for people with chronic pain and musculoskeletal conditions. Please visit the Chronic Pain Resource for consumers on our website. Sleep problems affect many people with chronic pain conditions. Thanks to Dr. Jonathan Fleming, UBC Sleep Disorder Clinic you will find a downloadable article for patients and health care professionals seeking "*Tips on Improving the Quality of Sleep*" as well as links to recent research and systematic reviews, and educational programs.

CIRPD has some wonderful longtime sponsors that continue to provide CIRPD with a wide range of resources. In recognition of their long term commitment and investment to support research and education programs to improve patient health outcomes the Board of Directors have created a new recognition category - CIRPD's President's Corporate Circle - to provide special recognition to those companies that have provided 10 plus years of support to CIRPD's mission.

The Woodbridge Goup became a primary supporter of CIRPD and launched our very successful Woodbridge Grants and Award Program.

Industrial Alliance Pacific, formerly Seaboard Life joined CIRPD in 1988 and has supported CIRPD programs, activities and fundraising events including a Million Dollar Golf Shoot Out. In addition to IAP's financial support, IAP has provided leadership support through their participation on CIRPD's Board of Directors Thank you to Robert Smith (1994), Gerry Bouwers, Tammy Hughes (current) for their talent, guidance, wisdom in laying the groundwork for CIRPD's success.

PricewaterhouseCoopers joined CIRPD in 1988 providing CIRPD Board of Directors with a Treasurer to oversee our financial policies, procedures and accounting system. Thank you to Phil Barter, Jane Butterworth, Mary Chong, Pamela Lee, Sue Tsiang (outgoing).

There are many wonderful software companies that have attained this long-term recognition circle through their very generous donation programs for registered charitable organizations that have contribute to CIRPD's ability to direct more of its funds towards program funding by providing complimentary or greatly reduced rates for charitable organizations.

Symantec Canada has provided a wide range of complimentary software to maintain and update our IT department since 1989. This included programs such as Norton Utilities, Norton System Works, Norton Client Security, and Norton Anti-Virus.

Microsoft Canada has both a software donation program and a generous reduction on software for non-profit organizations. CIRPD has received the benefits of Microsoft's commitment to non-profit organizations for over 12 years. CIRPD has recently benefited from Microsoft's affiliation with Techsoup, a non-profit distribution centre for donated products. Recent product support includes Microsoft Server 2003, Office 2003, Microsoft Exchange Server, and XP Professional Upgrades.

I would like to thank members of our individual President Circle donors Ian A Barclay and Harold Zlotnik for their longtime sustaining support.

Treasurer's Annual Report

Sue Tsiang CA

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

As CIRPD tends to hold its symposia on a bi-yearly basis the reduction in revenue is cyclical. Thanks to the increased support of the BC Gaming Commission, Direct Access Program we were able to attract additional support from stakeholders and expand our Chronic Pain Support Services. CIRPD has moved to smaller offices with project staff connecting to the main office server from their home offices. This has reduced CIRPD overhead expenses. This transition has resulted initially in some additional infrastructure expenses, offset by an infrastructure grant.

CIRPD must continue to develop other funding sources to maintain and expand services and activities.

It has been a pleasure serving on the Board for the past couple of years. Thank you everyone for the great couple of years.

Research Committee's Report

Jack Richman MD

I am pleased to report that CIRPD continues to make a difference through its research funding programs. Our continuing research partnership with The Woodbridge Group, Auto21, and the Canadian Institutes of Health Research (CIHR) -Institute for Musculoskeletal Health and Arthritis has led to two more doctoral awards as well as supported other graduate awards. This unique partnership cultivates and supports graduate students interested in mitigating occupant injuries from motor vehicle accidents.

Our continuing research partnership with The Woodbridge Group, Auto21, and the Canadian Institutes of Health Research (CIHR) -Institute for Musculoskeletal Health and Arthritis has led to two more doctoral awards as well as supported other graduate awards. This unique partnership cultivates and supports graduate students interested in mitigating occupant injuries from motor vehicle accidents. I am pleased to announce the latest successful applicants arising from The Woodbridge Grants and Awards Program.

(i) **Janessa Dale M Drake**, Influence of torsion on intervertebral disc injury mechanisms and the development of worker safety guidelines for injury prevention and treatment. [Kinesiology, University of Waterloo (Ontario) Supervisor: Dr. Jack P Callaghan]

(ii) **Brenda H Vrkljan**, Advancements in vehicular technology and older drivers: The capacity of older drivers to meet the visual, cognitive, and motor task demands of in-vehicle technology and their relationship to safe transportation [Rehabilitation Sciences, University of Western Ontario Supervisor: Dr. Janice A Polgar]

For a complete list of training awards, research projects and awards for excellence supported by CIRPD's Woodbridge Grants and Awards Program please visit the Research Database on our website.

Executive Director's Report

Marc White PhD

A primary focus of CIRPD is to bridge the gaps between research knowledge, clinical practice and consumer education. Over the past few decades there has been an information explosion, and a greater need for knowledge mobilization. To provide safe, optimal, cost-effective health care requires more efficient ways to keep health professionals up-to-date with clinically useful knowledge that can make a difference in patient health outcomes.

This past year CIRPD has undergone a major infrastructure transformation thanks to the continuing support of The Woodbridge Group. CIRPD has replaced old hardware and software in the office and is currently rebuilding our website to become a dynamic centre of knowledge and exchange to more effectively translate research evidence and facilitate its use by health professionals, consumers, employers and other stakeholders. The office also completed its database upgrade and conversion to prepare for a new web-based interface for CIRPD members which will be launched during the coming year thanks to the talent of our senior IT programmer, Mehmet Ali Vural.

CIRPD has received a number of contracts from the Massage Therapists Association of British Columbia to help them translate research evidence and create innovative programming to assist therapists utilize this knowledge in their training and practice. To date we have created guided assessment protocols (GAPS) to assist massage therapists in their case history taking, physical examination and documentation of their findings. We have also prepared 3 critical appraisals of systematic reviews of the research literature concerned with Osteoarthritis, Back Pain and Neck Pain. We are currently translating this material into E-Learning modules and finalizing negotiations with the University of Victoria to host these modules. In addition to these activities CIRPD has contributed articles to the MTABC journal related to enhance research literacy and interest in collecting and using outcome-based data in their practice. To this end CIRPD negotiated a licence with QualityMetric the owner of the SF-36v2 to test the perceived utility of using a "quality of life" instrument in clinical practice. To use the SF-36v2 in clinical practice has led to the creation of web-based scoring for RMTs participating in this study. This will allow RMTs to input responses to the SF-36v2 survey on-line and print out a patient report for their records. The collection of on-line data has also provided an opportunity to collect outcome-based data across the province to help us study the efficacy of massage practice. Patient identifiers are not inputted into the system, however key demographic information and information about the type of condition is recorded.

This innovative work has led to 4 abstracts being accepted at an upcoming conference on complementary medicine being held in December 2004 in Toronto: Facilitating Research Literacy for Massage Therapists: Creating A Research Website (Research In Process); Creating Evidence-Based Curriculum for Massage Therapy (Research In Process); Evaluating The Utility Of Using Standardized Outcome Measures In Massage Practice; and, Evidence-Based Guidelines For The Assessment And Treatment of Patients with Osteoarthritis.

We are excited about these activities and look forward to working with other health professional organizations link current research evidence to training and practice.

Thanks to the support of BC Government's Direct Access program, a program of the BC Gaming Commission, CIRPD has continued work on three innovative provincial projects.

Thanks to the hard work of Susan Lowe, Manager, Health Promotion, the work on these initiatives has been extraordinary. As part of our commitment to bring resources to people with chronic pain throughout British Columbia we are pleased that we were able to donate a new computer system to The Arthritis Society's Kelowna Resource Centre.

Special BC Report

Susan Lowe Manager, Health Promotion

With funding support provided by BC Gaming Commission's Direct Action program and with matching support from CIRPD partners, CIRPD has made significant progress on three BC projects.

Project 1. Evidence-based Resources for People with Musculoskeletal Problems

This program involves (i) understanding the information needs of consumers and other stakeholders (needs assessments), (ii) keeping abreast of current research, (iii) critical appraisal of this research using volunteer-based peer-review, (iv) translating this information into resource materials, (v) piloting and refining resource materials to target groups, (vi) disseminating free access resources and materials for people living in British Columbia via telephone support, web-based resources including pdf formats, and print materials.

Mehmet Ali Vural, CIRPD's senior IT project officer has been revamping CIRPD's website to become more consumer-friendly and creating the infrastructure to provide more dynamic information exchange and services for people in BC and beyond. Based on earlier needs assessments, patients want to receive more credible information about their condition and what research knowledge can positively impact their participation in making informed decisions about their health care options. Jill Pollack, our evidence-base resource person, has been systematically reviewing evidence-based resources on the web and providing the executive review team with promising links and resources. Those resources are reviewed and categorised by level of research evidence and then selected for our website based on level of evidence and perceived usefulness for target audiences.

This year we have held a series of community health workshops in collaboration with the Kitsilano Community Centre. In the Centre's first *Community Health Series*, CIRPD is delivering the following presentations, and providing information on them on our website:

- Communicating Effectively with Health Care Professionals
- Living a Healthy Life with Osteoarthritis (in collaboration with The Arthritis Society)
- Depression and Anxiety in People Living with Chronic Pain
- Recovering from Whiplash
- Improving Quality of Sleep.

In addition, CIRPD has begun to expand to other communities in the Lower Mainland. In partnership with the Chronic Disease Self-Management Program (CDSMP), CIRPD has planned a November session on Seniors Managing Chronic Pain for individuals in a Burnaby seniors' residence. Discussions with the South Fraser Health Authority have also taken place and contacts are very receptive to collaborating in the near future towards South Fraser community initiatives including workshops and/or conferences in Community Health and Community Mental Health. Discussion with community partners

in the Prince George region have responded positively to collaborating with CIRPD to provide additional programming in their region.. We are designing and refining this type of community resource on an ongoing basis to meet the needs of diverse target audiences.

Aboriginal Health and Wellness is another area in which we invested time and energy. We have held several meetings with representatives working on a local reserve in an ongoing effort to bring together a strong team experienced in chronic pain and addictions to accurately define the problem(s), explain the process, establish goals and potentially conduct a conference or series of workshops on Aboriginal Health.

Project 2. Living Well with Osteoarthritis

Osteoarthritis (OA) is the leading cause of disability in British Columbia. The Board of Directors of the Canadian Institute for the Relief of Pain and Disability has decided, working with its community partners, to have a special education program in British Columbia focused specifically on the prevention of disability through the creation of materials for patients with OA, and those at risk of OA. The Arthritis Chronic Disease Management Strategy is a special strategic initiative in a partnership with The Arthritis Society, BC and Yukon Division, and the BC Ministry of Health Services to create a systematic approach to improving health care for people with osteoarthritis and rheumatoid arthritis in BC.

This year CIRPD will be working with these partners to create and disseminate patient education materials. The OA project is continuing to be an important focus for CIRPD work as OA is the largest cause for long-term disability in BC. To address this issue CIRPD is actively involved in three activities: (i) pilot programming to foster community awareness and education, (ii) creating infrastructure (Task Force, Clearinghouse Web-Resources, Conference Planning) for enhancing employer/employee communication and health professional education, (iii) participation on the Arthritis Chronic Disease Management Strategy. These programs engages multiple partners and crosses many fields and disciplines.

Project 3. Creating Healthy, Safe and Productive Workplaces - Prevention of Work Disability - Facilitating Return to Work

This is the second year of this project to assess and translate the results of national and provincial discussions with stakeholders on how to improve current approaches to disability prevention, disability determination and disability management in the workplace and further engage business (large/small business organization and employees) in a participatory process to foster the creation of healthy, safe, accommodating and productive workplaces in British Columbia. There is a growing gap between what is known about disability prevention and what is practiced. There are, however, few education programs proactively engaging stakeholders in understanding current knowledge and applying such knowledge in their workplace.

A provincial committee was established to survey stakeholders, to identify challenges to improving current practices and to identify high-priority research areas in disability prevention, determination and management. This second year will reconstitute and expand the committee to focus on the dissemination of the discussion report and to set into place an action plan to facilitate improvements in current practicing participatory methods. To date CIRPD has hired a project coordinator, created a BC Provincial Task

Force on Disability Prevention, Determination and Management, held 2 strategic planning meetings to identify BC priorities, and is currently compiling samples of related literature and links, and web-based resources submitted by meeting participants for the benefit of the medical community, health care professionals and consumers. These resources will be accessible on-line once matched funding has been secured.

Planning has begun on holding a conference on disability prevention and management in BC bringing world class international, national and local researchers to present the “state of the knowledge” on what is known and not known about how to create effective disability prevention and management programs.

Nominations' Committee

Tammy Hughes and Bill Dyer

The following board members have agreed to stand for re-election to the board.

Ken Craig
Bill Dyer
David Ewert
Tammy Hughes
Mark Lodders
Jack Richman

The following board members are stepping down effective November 8, 2004.

Mary Ballard
Gloria Gilbert
Simon Mak
Joseph Stern
Sue Tsiang

It is with sincere appreciation that the Canadian Institute for the Relief of Pain and Disability would like to thank these board members for their involvement. Special thanks goes to Mary Ballard who has served on the board for 18 years and most recently acted as the Privacy Officer.

The nominating committee nominates the following list of candidates for the board positions 2004-2005.

Catherine Fast
Allen Lehman
Gerry Smith
Paul Toth
Jeremy Wong



Canadian Institute for the Relief of Pain and Disability



Financial Statements 2004

Financial Statements ending June 30, 2004

CANADIAN INSTITUTE FOR THE RELIEF OF
PAIN AND DISABILITY
FINANCIAL STATEMENTS
JUNE 30, 2004
(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, 2004 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.

Vancouver, B.C.
September 8, 2004


Chartered Accountants

CANADIAN INSTITUTE FOR THE RELIEF OF PAIN AND DISABILITY

STATEMENT OF FINANCIAL POSITION AS AT JUNE 30, 2004

(Unaudited)

	<u>2004</u>	<u>2003</u>
ASSETS		
Current Assets		
Cash	\$ 28,830	\$ 17,968
Accounts receivable	3,238	5,405
Prepaid expenses	<u>2,307</u>	<u>3,181</u>
	34,375	26,554
Restricted Cash - (Note 6)	85,032	79,214
Capital Assets - (Note 3)	<u>9,091</u>	<u>9,236</u>
	<u>\$ 128,498</u>	<u>\$ 115,004</u>
LIABILITIES		
Current Liabilities		
Accounts payable	\$ 8,230	\$ 3,215
Wages payable	<u>5,792</u>	<u>9,389</u>
	14,022	12,604
Accrued Interest Payable - (Note 4)	14,408	14,408
Deferred Contributions - (Note 6)	<u>85,033</u>	<u>79,214</u>
	<u>113,463</u>	<u>106,226</u>
NET ASSETS		
Net Assets		
Invested in capital assets	9,091	9,236
Unrestricted	<u>5,944</u>	<u>(458)</u>
	<u>15,035</u>	<u>8,778</u>
	<u>\$ 128,498</u>	<u>\$ 115,004</u>

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
 STATEMENT OF OPERATIONS AND CHANGES IN FUND BALANCES
 FOR THE YEAR ENDED JUNE 30, 2004
 (Unaudited)

	<u>2004</u>	<u>2003</u>
Revenue		
Donations	\$ 4,635	\$ 11,703
Fund raising and grants - (Note 5)	132,771	136,259
Interest and other income	5,494	13,439
Symposiums	<u>-</u>	<u>146,346</u>
	<u>142,900</u>	<u>307,747</u>
 Expenditures		
Accounting, legal and computer	9,197	5,296
Amortization	2,579	3,272
Bank charges and interest	400	3,157
Consulting, wages and benefits	82,160	118,732
Insurance	3,971	3,574
Office and sundry	4,261	6,399
Postage and printing	2,497	4,137
Rent	17,826	24,050
Symposiums	9,616	70,266
Telephone and utilities	<u>4,136</u>	<u>4,865</u>
	<u>136,643</u>	<u>243,748</u>
 Excess of revenue over expenditures for year	 <u>\$ 6,257</u>	 <u>\$ 63,999</u>

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

CANADIAN INSTITUTE FOR THE RELIEF OF PAIN AND DISABILITY
 STATEMENT OF CHANGES IN NET ASSETS
 FOR THE YEAR ENDED JUNE 30, 2004
 (Unaudited)

	Invested in Capital Assets	Unrestricted	2004 Total	2003 Total
Balance, beginning of year	\$ 9,236	\$ (458)	\$ 8,778	\$ (55,221)
Excess of revenue over expenditures	-	6,257	6,257	63,999
Invested in capital assets	(145)	145	-	-
Balance, end of year	<u>\$ 9,091</u>	<u>\$ 5,944</u>	<u>\$ 15,035</u>	<u>\$ 8,778</u>

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

CANADIAN INSTITUTE FOR THE RELIEF OF PAIN AND DISABILITY

STATEMENT OF CASH FLOWS

FOR THE YEAR ENDED JUNE 30, 2004

(Unaudited)

	<u>2004</u>	<u>2003</u>
Cash provided by operating activities		
Excess of revenue over expenditures for year	\$ 6,257	\$ 63,999
Items not affecting cash		
Amortization	2,579	3,272
Loss on disposal of equipment	300	-
	<u>9,136</u>	<u>67,271</u>
Net change in non-cash working capital balances		
Accounts receivable	2,167	(2,494)
Inventory	-	1,364
Prepaid expenses	874	14,493
Accounts payable	5,015	(5,181)
Wages payable	(3,597)	1,154
Unearned revenues	-	(51,253)
	<u>13,595</u>	<u>25,354</u>
Increase (decrease) in deferred contributions related to operations and research	<u>5,819</u>	<u>(194,598)</u>
	<u>19,414</u>	<u>(169,244)</u>
Cash provided by (used in) financing activities		
Bank loan/indebtedness	<u>-</u>	<u>(24,727)</u>
Cash used in investing activities		
Capital asset additions, net	<u>(2,734)</u>	<u>-</u>
Increase (decrease) in cash	16,680	(193,971)
Cash, at beginning of year	<u>97,182</u>	<u>291,153</u>
Cash, at end of year	<u>\$ 113,862</u>	<u>\$ 97,182</u>
Cash, is comprised of:		
Cash	\$ 28,830	\$ 17,968
Restricted cash	<u>85,032</u>	<u>79,214</u>
	<u>\$ 113,862</u>	<u>\$ 97,182</u>

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

CANADIAN INSTITUTE FOR THE RELIEF OF PAIN AND DISABILITY

NOTES TO FINANCIAL STATEMENTS

JUNE 30, 2004

(Unaudited)

Note 1 Purpose of the Institute

The Institute'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 Institute 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 Institute 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

NOTES TO FINANCIAL STATEMENTS

JUNE 30, 2004

(Unaudited)

Note 2 Significant Accounting Policies - (continued)

(b) 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 2004</u>	<u>Net Book Value 2003</u>
Computer	\$ 15,756	\$ 9,740	\$ 6,016	\$ 5,392
Furniture and equipment	26,076	23,001	3,075	3,844
	<u>\$ 41,832</u>	<u>\$ 32,741</u>	<u>\$ 9,091</u>	<u>\$ 9,236</u>

Note 4 Accrued Interest Payable

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

Note 5 Fund Raising Activities

Fund raising activities consist of direct assess grants, special events and grants revenue.

	<u>2004</u>	<u>2003</u>
Direct access	\$ 50,000	\$ 37,131
Grant revenue	82,771	99,128
	<u>\$ 132,771</u>	<u>\$ 136,259</u>

Note 6 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 Institute without restrictions.