

AGM 2013



CIRPD

CANADIAN INSTITUTE FOR THE
RELIEF OF PAIN AND DISABILITY

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ANNUAL GENERAL MEETING AGENDA

November 22, 2013

10:00am – 12:00pm

Venue

Eye Care Centre Auditorium
Vancouver General Hospital
2550 Willow St.
Vancouver, BC

AGM Agenda

1. Welcome
2. Presentation and Discussion: Dr. Catherine Loughlin - The Role of Leaders in Creating Psychologically Healthy Workplaces (Open to the public)

Participants will learn to:

- a. Identify what constitutes toxic behaviour at work and the costs of this behaviour
 - b. Recognize 4 common myths about toxic behaviour at work
 - c. Outline 3 steps leaders can take to keep these behaviours in check
3. Live Audience Q&A with Dr. Loughlin
 4. Minutes of Annual General Meeting, November 22, 2012
 5. Annual Report
 6. President's Report
 7. Executive Director's Report
 - a. Update on Health and Work Productivity Portal
 8. Treasurer's Annual Report
 - a. Financials
 - b. Appointment of External Accountants for Annual Review (2014)
 - c. Annual Review Financial Statements for the Year Ending June 30, 2013
 9. Research Committee's Annual Report
 10. Nominations Committee's Report
 11. Election of Directors
 12. New Business
 13. Motion to Adjourn

MINUTES OF PREVIOUS ANNUAL GENERAL MEETING

Nov. 22, 2012

10:30 am – 12:00 pm (PST)

Eye Care Centre Auditorium, 2550 Willow St., Vancouver, BC

Attendance (Members Named):

(Online) Cathy Rambarran, Sylvie Gelinis, Bill Dyer, Beverly Anderson, Mani Lang and

28 non-members

(In person) Stan Jung, Marc White, Liz McCulloch, Lisa McGuire, Janette Lyons, Tonya Hyde, Lisa Mighton, Heather Devine, Linda Prochaska, and 1 non-member

AGM Minutes:

1. Welcome and Introduction
2. Special Presentation and Discussion: Merv Gilbert, "Creating Psychological Health and Safety at Work". (The presentation recording is posted on the CIRPD website)
3. MSC (Lisa M) Minutes of Annual General Meeting, November 24, 2011
4. MSC (Stan J) Acceptance of CIRPD Annual Report
5. MSC (Lisa M) Acceptance of President's Report
6. MSC (Janette L) Acceptance of Treasurer's Report
 - Request for more detail regarding revenue and expenditures of \$336,081. Marc provided clarification regarding posting of grants and amount of BC government grant.
7. MSC (Janette L) to approve change of accountants to conduct Annual Review 2012
8. MSC to accept the Executive Director's Report
 - Janette asked for further clarification on how the HWP was going to be marketed, rolled out and funded. Marc discussed stakeholders a participants and marketing partners and subscription model for parts of website till more solid funding can be established
9. Nominations Committee Report and Election of Directors:
 - Seeking Re-election: Sylvie Gelinis, Janette Lyons, Stan Jung, Kenneth Craig, Adrienne Hook, Mieke Koehoorn, Doug Kube, Lisa McGuire, Marisa Cornacchia, Bill Dyer, Liz McCulloch
 - New Nominee: Jories Timmers
 - No further nominations were received from the floor.

MSC (Janette L) to accept the Nominations Committee Report and approve by acclamation all those nominated to the Board

Meeting terminated at 12:15 pm

PRESIDENT'S REPORT

Adrienne Hook

This year marks the 27th anniversary for the Canadian Institute for the Relief of Pain and Disability (CIRPD) to reduce pain, pain-suffering and disability. CIRPD's mission is to prevent and reduce pain, pain-suffering and disability by closing the gap between what is known from high quality research and what is done in policy and practice. To do this CIRPD engages a broad-base of stakeholders throughout British Columbia and across Canada in various activities throughout the year.

The past year has been a whirlwind of activity. Through the integration of on-line learning we have been able to provide educational resources to residents living in 148 towns and cities in British Columbia alone. On behalf of CIRPD's board and membership I would like to thank the Province of British Columbia for their continued financial support for our programs and services in British Columbia.

These webinars have had a tremendous response from people with pain and from their family members. The series also provides access to up-to-date programming for community partners. For instance, on Vancouver Island, one of the regional health centres hosts groups of clients for viewing webinars. The webinar series provided them with additional resources and an educational focus around which to bring their clients (mostly those dealing with chronic pain) together. In Kelowna, registrants get together to listen to webinars and have a group discussion around the topic. Also in Richmond, the Richmond Centre for Disability hosts live viewings of our webinars for their members who may not be able to access technology easily.

The BC Consumer Guide has been updated to include over 500 resources available to people in British Columbia. These resources include support groups, webinars, videos, podcasts, educational workshops, community resource centres, and referral resources. Our webinar series produced in partnership with PainBC are also viewed across Canada and around the world.

Under Dr. White's research appointment with the Department of Family Practice at the University of British Columbia, he secured a competitive grant to conduct a best-evidence synthesis on interventions to reduce the risk of unnecessary disability and work absence. The research project was funded by WorkSafeBC and brought together academic researchers from UNBC, UBC, University of Lethbridge and Université Laval, with community partners including BC Construction Safety Alliance, The FIOSA-MIOSA Safety Alliance of BC, Healthcare Benefit Trust, Health Employers Association of British Columbia and Stantec. The results of this evidence-based synthesis clearly demonstrates the importance of employers to create and implement policies that facilitate safe, psychologically healthy, accommodating and productive workplaces – places where people with injuries or chronic diseases want to stay at work or return to work.

I would also like to thank the contribution of CIRPD board members who have provided strategic guidance and oversight, as well as CIRPD staff and office volunteers under the leadership of Dr. Marc White. CIRPD relies on the volunteer efforts of its academic and community partners to produce and disseminate high quality information to all stakeholders related to our mission.

We thank you for your interest in our mission and activities.

FINANCIAL REPORT

Janette Lyons CMA, BCom

Financial Overview of the past year

For the year ended June 30, 2013, CIRPD ended the year with cash of \$105,634 which was funded by the continued support from the Province of British Columbia's Community Grant Program. In March 2013, CIRPD received \$200,000 from the Province, enabling CIRPD to continue to develop and roll out programs and activities across the province increasing its delivery from 98 to 148 BC Communities. The provincial programming supports the updating and production of educational resources to meet the needs of people with chronic pain and disability.

For the year ended June 30, 2013, total revenue was \$387,304 from current and deferred contributions. These contributions came from a variety of sources including the Provincial Government's Community Grants as well as funding and donations from University of British Columbia, Insurance Corporation of BC, WorkSafeBC, Auto 21, and project revenue from hosting the Isocyanates and Health Conference held in April 2013. This revenue was utilized on a variety of programs including the BC Consumer Health Project, the Health and Work Productivity Web-Portal, Isocyanates and Health Conference and funding the wages and salaries of the staff who deliver the CIRPD programs.

CIRPD was pleased to receive continued annual support from the Province of British Columbia's Community Grant Program that has assisted us in the roll out of programs and activities throughout the province. The provincial programming supports the updating and production of educational resources to meet the needs of people with chronic pain and disability. This funding is annual only and CIRPD submits an application at the end of November each year seeking renewal of funding support. CIRPD continued its relationship with the accounting firm Wolrige Mahon to perform the year-end review (June 30, 2013). CIRPD will need to prepare for the transition to the new Canadian Not-for-Profit Act immediately following the next fiscal year end to meet the October 17, 2014 deadline. The Canadian Not-for-Profit Act will require CIRPD to move to an audit (versus a review) for the year ended June 30, 2015, which Wolrige Mahon can perform.

Cash flow continues to be a top priority for CIRPD due to the annual short-term funding nature of our programs and services. Currently CIRPD does not have the cash funding in place to fund next year's programs (see Budget and Fundraising section for more detail).

Summary of Key Project Deliverables over the past year

Health and Work Productivity Web-Portal (HWP-Portal)

In the prior year we completed pilot-testing the literature translation process with select stakeholders to assess the potential value of HWP-Portal as an online collaborative environment to find credible relevant resources and pilot test academic/stakeholder translation process. The success of this project led to a second successful WorkSafeBC application to bring together researchers and community partners to identify and synthesize research on interventions to reduce the risk of prolonged disability and work absence. The review of these interventions will then be populated on the HWP site. The project was funded from a competitive WorkSafeBC

FINANCIAL REPORT

Continued...

Innovation-At-Work grant associated with Dr. White's UBC appointment and funding support from Healthcare Benefit Trust. CIRPD is currently submitting a new application to the current WorkSafeBC grant competition to support the Scaling Up of the HWP Portal.

Actions planned for this year:

- Engage organizational stakeholder parties to participate in HWP project – engaging their membership in knowledge translation process
- Identify and engage academic topic editors to participate in HWP project
- Identify and engage academic/ workplace librarians to join HWP IRC
- Seek partnership funding and sponsorship of \$225,000 per year for 3 years to support HWP population and Phase III modules.

CIRPD – Consumer Health Programs and Services / Disability Stakeholders

- This past year we renewed CIRPD educational resources providing relevant knowledge, tools and other resources (podcasts, video, interactive media) to prevent and reduce pain, pain-related suffering and disability. We updated CIRPD self-management resources, and expanded CIRPD – BC Consumer Health Directory helping people in BC find programs, services and resources to help them live well with chronic disease.

Actions planned for this year:

- Enhancing collaboration with community partners in the planning, delivery and evaluation of CIRPD webinars, programs and services to increase access for people living in rural areas in BC
- Extending our outreach through the delivery of additional webinars hosted in rural communities in BC

International Conference: Isocyanates and Health: Past, Present and Future

The Conference originally scheduled for November 2012 was rescheduled to April 2-3, 2013 due to Hurricane Sandy. Following the Conference we held a research collaboration meeting on April 5, 2013 and engaged research funders, regulatory bodies and other stakeholders to plan mechanisms to advance research in high priority areas relevant to regulators, workers, scientists and clinicians. A manuscript has been prepared and is being submitted to the Journal of Occupational and Environmental Health.

FINANCIAL REPORT

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Budget and Fundraising for 2013/2014

A draft of the CIRPD 2013/2014 budget will be circulated. This budget will focus on the delivery of CIRPD's Consumer Health Programs and Services and scaling up the Health and Work Productivity Web-Portal.

CIRPD will apply for Provincial Community Grant Gaming funds of \$245,000 to better address the demand for programs and services in rural communities in BC. This application will be submitted immediately following the AGM as the deadline is November 30, 2013.

Our fundraising target (excluding the Provincial funding) for the current fiscal year is \$225,000 to support the completion of additional modules for the Health and Work Productivity Web-Portal project. The success of our partnership and sponsorship activities is critical to ensure there are adequate funds in place to deliver needed programs and services and to address cash flow needs.

NOMINATIONS COMMITTEE REPORT

Bill Dyer (Board Secretary and Chair of the Nominations Committee)

The following board members have agreed to stand for re-election: Marisa Cornacchia, Kenneth Craig, Bill Dyer, Sylvie Gelinas, Adrienne Hook, Doug Kube, Janette Lyons, Jories Timmers, and Lisa McGuire.

The following are new Board nominees:

Terrance J. Bogyo

Terry is an independent researcher, speaker, and commentator with an international reputation for his knowledge of workers' compensation, occupational health, and disability management issues. He is a member of the U.S. based National Academy of Social Insurance and is a Canadian Certified Rehabilitation Counselor(CCRC).

He recently retired from WorkSafeBC as the Director of Corporate Planning and Research after a thirty year career ranging in responsibilities from work as a vocational rehabilitation consultant to senior management positions in policy, strategy and administration. He continues to instruct disability management and program evaluation courses for the National Institute of Disability Management and Research.

Terry earned his B.Sc. from the University of British Columbia, holds a Special Certificate in Public Administration from the British Columbia Institute of Technology, and received his MBA from Simon Fraser University. He is a frequent media commentator on workers' compensation issues, a regular contributor to various workers' compensation publications, and a sought after speaker on future work-related risks and challenges. His informative blogs may be accessed at www.WorkersCompPerspectives.wordpress.com and www.WorkersCompPerspectives.blogspot.ca

Jennifer Christian, MD, MPH

Dr. Jennifer Christian is an internationally-known thought leader and advocate for improving health and functional outcomes and for preventing needless work disability in healthcare, workers' compensation, and disability benefits systems. Dr. Christian is President of Webility Corporation. Webility does management consulting and training projects with clients in several sectors: healthcare delivery organizations, managed care companies, large and small employers, workers' compensation insurers, disability insurers, state funds and other governmental agencies, including the US Social Security Administration.

Dr. Christian is board-certified in occupational medicine with medical and public health degrees from the University of Washington in Seattle. She is a Fellow of the American College of Occupational & Environmental Medicine and chairs its Work Fitness & Disability Section.

NOMINATIONS COMMITTEE REPORT

Continued...



Alison Hietanen

Alison Hietanen holds a senior position with the Health Sciences Association of BC, a healthcare union representing allied health employees across the Province.

In her capacity as Membership Services Coordinator – Disability Management, Alison is the operational lead of a team of labour relations specialists who provide advocacy services to the union membership in the areas of WorkSafe BC claim appeals, long term disability claim appeals, as well as complex return to work and duty to accommodate situations. She has also been responsible for the development and implementation of an early intervention program and, subsequently, an enhanced disability management program for their 16,000 members in British Columbia. These programs have successfully demonstrated that meaningful collaboration between union and employer in supporting injured and ill employees can result in significantly improved outcomes for workers and financial benefits for employers.

Alison is a strong proponent of the concept of comprehensive wellness initiatives in the workplace, and the value they can bring to creating a healthy, productive and respectful work environment



Steve Inouye

Steve Inouye has been involved with disability management for 14 years and is a Certified Disability Management Professional. Currently, he is implementing enhanced disability management for health employers across British Columbia, with The Health Employers Association of BC. Steve has a keen interest in engaging and collaborative solutions that achieve objective improvements to disability outcomes.

He started his career with the Workers' Compensation Board of BC where he worked with the transportation, industrial, retail industries, and government branches. Joining Vancouver Coastal Health Authority during its formation in 2003, Steve assisted the launch of its first centralized disability management service. He participated in the development of several programs ranging from early intervention to long term accommodation. He has advised workers and workplaces in both urban and rural settings, ranging from diverse community programs to the Vancouver General Hospital and other of the province's busiest facilities.

Steve enjoys supporting health-related charities. He has developed innovative and successful fundraising strategies as a volunteer Co-Chair with the Canadian Cancer Society.

NOMINATIONS COMMITTEE REPORT

Continued...



Jason Mazzarella, DC

Dr. Jason Mazzarella has taken over 120 CME courses in Pain Management and obtained a Diplomate with the American Academy of Pain Management and the Canadian Academy of Pain Management. He has a certification in pain due to traumatic stress. He has treated over 10,000 patients to date with acute or chronic pain and has performed 974 chronic pain independent medical assessments.

Professionally, Dr. Mazzarella has researched and developed post graduate courses concerned with trauma, kinematics, rehabilitation and pain. He is currently developing curricular materials on occupant kinematics, injury potential and the correlation with the biopsychosocial model of pain for Physical Medicine and Rehabilitation residents and faculty members at McMasters University.



Ed McCloskey

Ed McCloskey is a consultant in occupational health and safety and workers compensation research, policy, and practice. He recently retired from his position as Director of the Research Secretariat at WorkSafeBC, where he was responsible for administration of the WorkSafeBC research funding program. He also served as Associate Editor of the International Journal of Workplace Health Management.

Prior to joining WorkSafeBC in 2005, Ed spent 25 years with the Ontario Ministry of Labour in various capacities including Director of the Health and Safety Policy Branch in the Policy Division, and Director of the Occupational Health and Safety Branch in the Operations Division. He served as Ontario representative on the Council of Governors of the Hazardous Materials Information Review Commission, and the Occupational Safety and Health subcommittee of the Canadian Association of Administrators of Labour Legislation. He was also Chair of the Canadian Standards Association Strategic Steering Committee on Occupational Health and Safety.

Ed has a BSc from University College, Galway, Ireland, and a PhD from the University of Victoria, BC.



Werner Schulz

Werner Schulz worked in the fields of rehabilitation and education for over 35 years before retiring, in 2013 from Health Care Benefit Trust (HBT) as Vice President, Rehabilitation Services. He has a BSc in Kinesiology from Simon Fraser University and a Masters in Arts from the University of British Columbia. He also held the professional designation of Canadian Certified Rehabilitation Counselor. Werner worked at WorkSafe BC as a Rehabilitation Consultant and Manager for 15 years prior to moving to the Open Learning Agency (OLA) in 1990. At OLA, Werner developed Skills Centre Operations into one of OLA's major divisions and held the position of Executive Director and Dean of Information Technology prior to moving to HBT in 2005. Under Werner's direction Skills Centre

NOMINATIONS COMMITTEE REPORT

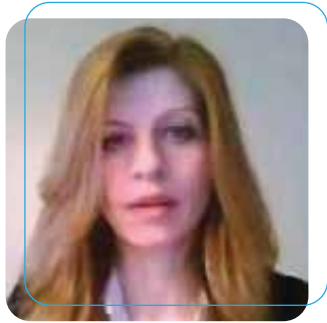
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Operations developed innovative award winning internationally recognized education and rehabilitation programs for persons with disabilities, individuals on income assistance persons requiring educational upgrading. He lives in Richmond with his wife and has three daughters and six grandchildren.

We welcome nominations from the floor.

We would like to thank outgoing members, Stan Jung, Mieke Koehoorn, and Liz White for their dedicated service as board members. Their knowledge and insight have been invaluable to the organization.

Board of Directors Standing for Re-election



Marisa Cornacchia, BA, RN, COHN (C), DOHS – Occupational Health Nurse

Ms. Cornacchia is a registered nurse with a specialty in critical care and occupational health nursing. She has a Bachelor of Arts from York University with a focus in psychology and sociology, a Diploma in Occupational Health & Safety from McMaster University and is currently completing a Masters in Business Administration at Columbia Southern University. She is an active member of the Canadian Occupational Health Nurses Association and is licensed to practice nursing in Ontario, Manitoba and British Columbia.

Marisa has been recognized with several awards. In 2007 she was the recipient of the Robert Saulters Humanitarian award at the Hospital for Sick Children. She was the first ever recipient of the award from an acute care setting. She was recognized as the first acute care practitioner to provide strong compassionate care efforts with lasting effects in a short stay area.

Marisa has a strong interest in program development, project management and research. Currently she is working with emergency room teams of doctors and nurses on programs for pain management in the acute care setting. With over 17 years of critical care nursing in conjunction with occupational health nursing Marisa's focus is on evidenced based care in the rehabilitation field, for both adult and youth workers, to enhance and restore functional abilities and quality of life.



Kenneth Craig, PhD, Professor Emeritus of Psychology, University of British Columbia

Dr. Craig is Director of the Health Research Resource Office in the Office of the UBC Vice President Research, Chair of the Behavioural Research Ethics Board (B) and a Professor Emeritus of Psychology at the University of British Columbia.

At UBC he served as Director of the Graduate Programme in Clinical Psychology, Associate Dean of Graduate Studies, CIHR Senior Investigator, and Distinguished Scholar in the Peter Wall Institute for Advanced Studies. Current activities at UBC include responsibility for development of health research teams. He participated in a number of successful health research teams, including those pursuing pediatric pain, pain in the elderly and development of interdisciplinary training models for management of children's pain.

NOMINATIONS COMMITTEE REPORT

Continued...

His research pursued the application of social science methodology to population and public health challenges of pain and disability. He has challenged the biomedical focus upon pain by providing a comprehensive systems perspective on pain and disability that incorporates an understanding of social factors contributing to under-management of pain.



Bill Dyer, Consultant, Dyer & Associates

Mr. Dyer has a Bachelor degree in Business Administration and is a Certified Disability Management Professional as well as being a Fellow Chartered Insurance Professional. Bill worked in the insurance sector for over 23 years, focusing primarily on early intervention and disability management programming.

Before establishing his own consulting firm of Dyer & Associates in 2008 he held a number of senior positions within the industry; a Senior Consultant with Marsh Canada's Integrated Disability Management division; the General Manager of FIDAS (Forest Industry Disability Adjudication Service), which adjudicates the LTD claims for the Forest Industry in British Columbia. In this role Bill was responsible for the development and implementation of this organisation including policies, procedures, staffing, systems and transition from the previous supplier.

Bill started his insurance career with ICBC, most notably holding the position of Manager, Injury Management Support, where he was responsible for a provincial program of early intervention protocols for clients injured in motor vehicle crashes in BC. Bill was ICBC's liaison officer for CIRPD's BC Whiplash Initiative a province-wide multi-agency initiative working with academic leaders across the continuum of medical education.

Bill Dyer sits on the board of the Canadian Association of Disability Management Coordinators; the Canadian Institute for the Relief of Pain and Disability, as well as a council member of the Canadian Pension and Benefit Institute and is recognized leader in promoting disability management and return to work programming across Canada.



Sylvie Gelinas, BSc MA, Manager - Disability Health, in the Safety, Health and Wellness Department, WorksafeBC.

Ms. Gelinas has a Masters degree in Disability Management and is a Manager - Disability Health in the Safety, Health and Wellness department with WorksafeBC. She is responsible for managing all health-related absences from work regardless of whether a claim arises out of an occupational or non-occupational illness or injury. She is responsible for promoting and coordinating best practices with respect to disability management and rehabilitation. In addition to her expertise in Disability Management, Ms. Gelinas has over 25 years experience in Labour Relations/Human Resources both in the private and the public sector. Her major project, "The Private Health Care Option in Disability Management" examines whether financing private surgery is a viable option in disability management by analyzing some of the associated benefits and risks.

NOMINATIONS COMMITTEE REPORT

Continued...



Adrienne Hook, Executive Director, Health Authority Services, Health Employers Association of BC

Ms. Hook currently holds the position of Executive Director, Health Authority Services with The Health Employers Association of BC. Adrienne has in excess of 20 years of health care experience having started her career providing direct clinical care as part of the team at the Juan de Fuca Hospital Society in Victoria. For the past 15 years she has worked in progressively more complex roles; the vast majority of her career working in complex labour relations environments with multiple unions and numerous stakeholders.

Her organisational assignments have included implementing Attendance Management Programs and designing Critical Incident Response Toolkits for Managers. Her responsibilities included administration of the Employee Family Assistance Program, design and implementation of an Early Intervention Program, WCB claims management protocols and case management of long term disability claims.

Her key area of interest has been developing and implementing evidence-based employee centric disability management programs. As an advocate of ability management and accommodation, Adrienne is convinced of the value of working with the employee and their union to facilitate meaningful and sustainable return to work programs.



Douglas Kube, Director, Health & Safety, Sofina Foods Inc

Doug Kube has 25 years of experience in occupational and public health, workplace safety, regulatory affairs, workers compensation, disability and risk management. He has experience in many sectors, including food, engineering consulting, aviation, aerospace, courier/mail, transportation, warehousing, healthcare, pharmaceutical and chemical manufacturing. As former Director, Occupational Health Services at Air Canada he provided operational leadership to both medical and non-medical staff to implement new occupational medicine, disability management, accommodation and workers compensation programs. As the Director, Human Resources at Purolator Courier he led the implementation of occupational health and benefits programs that resulted in significant improvement to accommodation and return to work practices. Doug also has considerable experience working with unions including the Canadian Auto Workers, Canadian Union of Public Employees, International Association of Machinists and Aerospace Workers, Air Canada Pilots Association and the Teamsters.

Doug has been a member of the Board of Directors at CIRPD since 2006. He is a member of the Accessibility Advisory Committee at the Town of Richmond Hill. He has also sat as a member of York Central Hospital's Board of Trustees' Quality & Performance Management Committee and on the Board of Directors and Governing Council at the Ontario Chamber of Commerce. Doug is also a Fellow with Leadership for Environment and Development International of New York. He has published several articles, and has presented papers at numerous global, national and local conferences.

NOMINATIONS COMMITTEE REPORT

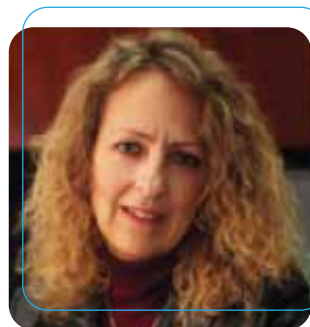
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Janette Lyons, C.M.A., BCom., Chief Financial Officer, Powerex

Ms. Lyons is currently the Chief Financial Officer at Powerex. She has held several senior and financial management positions for a number of organizations over the span of her career and most recently was with BCTC in the role of Manager, Budgeting, Forecasting and Analysis.

Prior to this appointment, she was the V.P. Finance at Wakefield Homes. Janette has a B.Comm (Finance) from University of Western Ontario, a C.M.A. (Certified Management Accountant), and a Leadership Development Certificate from Western Ivey School of Business. Janette has over 20 years experience as a financial professional and her key strengths include strategic planning, process improvement utilizing Six Sigma and financial management. Janette is married with two children and resides in West Vancouver.



Lisa McGuire, CRSP, Executive Director, FIOSA-MIOSA Safety Association of BC, formerly the BC Food Processors Health & Safety Council

Ms. McGuire's primary responsibility is to carry out the strategic plans and policies established by the FIOSA-MIOSA Board. The FIOSA-MIOSA is a not-for-profit organization that seeks to address challenges and opportunities specific to food and beverage processing and manufacturing and to set industry standards for health and safety in BC. The FIOSA-MIOSA mission is "to foster commitment among employers to improve workplace health and safety". In order to achieve this goal, the FIOSA-MIOSA works closely with industry and other associations on developing best practices; offers courses such as leadership training for supervisors; provides resources such as the online 'Source for Occupational Safety'; one-on-one consultation and innovative programs such as the SYNERGY safety network. Lisa was one of the founders of the BC Food Processors Association, an organization set up by HR and safety professionals. Lisa served as a Director on the BCFPA Board and was the first Chair of the BCFPA Safety Committee. The accomplishments achieved by this Committee include designing an industry 'Return to Work' form, producing an award winning training DVD and obtaining industry support for the establishment of a Safety Council for the Food Processing Industry.



Jories Timmers, IT Director and CIO at Powerex

Mr. Timmers is the IT Director and CIO at Powerex, the Energy Trading arm of BC-Hydro, where he leads a team of 60 personnel in Vancouver. His specialization in IT Strategy and Security, Project Management, Compliance, Audit and Governance has been gained over 20 years while working internationally in the Netherlands, Italy, France, Spain, Switzerland and Canada. He has degrees from the Delft University of Technology in Computer Engineering, an MBA from McGill and holds PMP, CISA, CISM and CISSP certifications. Jories is past president of the CIO Association of Canada's Vancouver chapter, a not-for-profit community of IT leaders whose mission is to facilitate networking, sharing of best practices and executive development. In his spare time, Jories enjoys outdoor activities with his wife and son.

EXECUTIVE DIRECTOR'S REPORT



Marc White PhD

Contrary to popular opinion, chronic pain can affect people at any age. Chronic pain impacts about 1 in 5 Canadians during their lifetime and according to a Canadian Community Health survey (2008/9) reported by Stats Canada, 1 in 10 chronic pain sufferers are aged between 12 and 44 (more than 1.5 million young adults) with back problems and migraine headaches being the most common pain-related conditions. Chronic pain takes a toll on families, the health care system and society as a whole. Chronic pain can limit one's participation in everyday activities including work participation. It can also be a contributing factor for suicide for young adults with mood disorders and anxiety.

Social Media – Facebook and Twitter

For the past few years in order to reach younger populations and people who are highly active online, we have been using various social networks as modes of sharing research-based resources. We have expanded our messaging to incorporate the use of Facebook and Twitter. Through these online communities we have made lasting connections with other community-based organizations and shared a wide variety of credible resources with people who need it most. Our social media strategy focuses on creating dialogue around issues of chronic pain and disability as well as being a consistent source of credible information.

Since launching our social media program we have:

- Connected with over 3,100 Followers on Twitter
- Posted over 3,500 resources to Twitter
- Connected with 1,264 Friends on Facebook
- Posted over 500 links to resources on Facebook

We regularly share information with a variety of BC-based organizations, who pass our information on to their followers including: University of Victoria's Chronic Disease Self-Management Programs, Pain BC, BC Coalition for People with Disabilities, BC Healthy Living Association, Massage Therapy Association of BC, Physiotherapist Association of BC, The Heart and Stroke Foundation, Arthritis Society - BC Chapter, Neil Squire Society, Impact BC, and Arthritis Research Centre of Canada.

The BC Consumer Programs, Services and Web Resources Directory

The BC Directory provides targeted information about common health conditions and is linked through the very successful HealthLink BC. It provides hundreds of links to programs, services, support groups, and Internet resources. The BC Consumer Directory alone received 16,000 unique visits viewing over 65,000 pages this past year.

EXECUTIVE DIRECTOR'S REPORT

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Condition (Resources can be marked for multiple conditions)	Number of programs, services, support groups, and internet resources shown
Arthritis	153
Back pain	52
Chronic pain	158
Disability Prevention and Management	21
Fibromyalgia	119
Healthy Living	67
Healthy Thinking	190
Neck Pain	48
Seniors' Health	142
Sleep quality	12

Related conditions are also linked from each main topic page. Additional links have been added directing consumers to credible resources related to disability prevention and management, rehabilitation referral services, and general health websites. Consumers can search for programs, services, and support groups by condition and by location.

The BC Consumer Guide has been updated to include over 500 resources available to people in British Columbia. These resources include support groups, webinars, videos, podcasts, educational workshops, community resource centres, and referral resources offered by The Arthritis Society of BC/Yukon, The Arthritis Research Centre of Canada (headquartered in Richmond, BC), Neil Squire Society, BC Mental Health Works, Canadian Mental Health Association, public and private health centres with services aimed at treating people with chronic pain, impairments and disability, self-management support groups throughout the province including the Chronic Pain Self-Management programs hosted by University of Victoria listed in the directory.

These resources are utilized in 148 BC communities online plus a variety of online resources available to anyone with a computer and internet access.

EXECUTIVE DIRECTOR'S REPORT

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Educational Webinars

We have two ongoing webinar series on the topics of Chronic Pain, as well as Stay at Work and Return to Work. The following webinars occurred during this past fiscal period and have been viewed by 21,973 (attendees and downloads):

Webinar Titles	Registered	Attended	Viewed Video since Posting
The Chronic Pain Conundrum July 25, 2012 at 11am PST, Barry Sessle MDS, PhD (Professor & Canada Research Chair with the Faculties of Dentistry and Medicine, University of Toronto).	370	173	621
Myths and Facts about Sleep and Chronic Pain August 14, 2012, Jonathan Fleming, MD (Consultant with the Sleep Disorders Program, UBC Hospital; Associate Head for Education in the Department of Psychiatry, UBC).	522	265	1125
Strategic Issues and Solutions in Workplace Mental Health – Margaret Tebbutt, October 11, 2012	125	73	253
Early, Safe and Sustainable Returning to Work After Injury or Illness, October 26, 2012, Douglas Kube (Senior Consultant with Stantec; member of the Board of Directors at the Canadian Institute for the Relief of Pain and Disability (CIRPD).	68	32	200
Creating Psychological Health and Safety at Work, November 19, 2012, Merv Gilbert PhD (Organizational Health Psychologist with Centre for Applied Research in Mental Health and Addiction)	53	30	311
Talking with Your Doctor and Other Healthcare Professionals, November 20, 2012, William Godolphin Ph.D. and Angela Towle Ph.D. (Co-Directors of the Division of Health Care Communication at University of British Columbia).	92	40	242
Yoga for People in Pain – 5 part webinar series – Neil Pearson, January 7 – February 1, 2013	1400	635	8419
Pain Medications: A Pharmacist's Perspective – Edward Dillon, January 23, 2013	237	137	537
Accommodating Workers with Mental Health Disorders: From Research to Practice – Izabela Schultz, PhD January 31, 2013	198	120	286
Factors Affecting Return to Work Following Low-Back Pain – Ivan Steenstra, PhD February 22, 2013	146	62	148
Human Rights, Duty to Accommodate and Bullying in the Workplace: Essentials for Workplace Stakeholders – Shannon Wagner PhD, March 7, 2013	119	67	278
Deepening the Skill-set for Return to Work: Psychosocial Intervention Made Practical – Matthew Graham PhD, March 15, 2013	206	90	281
Psychological Factors in Pain –Ingrid Federoff, March 26, 2013	125	72	468

EXECUTIVE DIRECTOR'S REPORT

Continued...

Webinar Titles	Registered	Attended	Viewed Video since Posting
The Role of Co-Workers in the Return-to-Work Process – Debra Dunstan, March 27, 2013	115	61	61
Chronic Pain: Is it all in the Brain? – Fernando Cervero, April 16, 2013	480	195	484
The Biopsychosocial Model and My Pain - May Caprio, April 22, 2013	493	269	1096
Coping with Persistent Pain: Current State of the Science - Francis Keefe, May 16, 2013	304	168	559
Measuring the Effect of Workers' Health on Work Productivity – Fredrik Odegaard - June 27, 2013	72	28	51
I Have Neck Pain: What Are My Options? – Jordan Miller, July 31, 2013	317	145	250
Cognitive Behavioural and Acceptance-Based Approaches for Managing Pain: Tools for Pain-Related Suffering – Matthew Graham – September 27, 2013	559	268	328
Intro to Mindfulness and Chronic Pain – Five-part Webinar Series – Linda Turner PhD – Five consecutive Tuesdays, October 1 through October 29, 2013	1100	550	1100
Adapting Chronic Pain Self-Management to the Workplace –William Shaw PhD – October 18, 2013	88	45	57
Occupational Disease and Return to Work: Strategies for Success –Sharon Switzer-McIntyre PhD – October 23, 2013	91	28	41
How to use Movement and Graded Exposure to Reduce Pain – Jordan Miller - November 6, 2013	387	116	166
Is Office Ergonomics a Pain? – Geoff Wright – November 14, 2013	170	65	76
Envisioning the Future of Disability Policy in Canada –Ellen MacEachen PhD and Emile Tompa PhD – December 5, 2013	7	0	0
Total	8086	3858	18115

CIRPD has been working closely with *PainBC on the Chronic Pain* series. They have played an instrumental role in promoting the webinars to their constituents and co-hosting our most recent Intro to Mindfulness for Chronic Pain five-part webinar series that occurred in October. The Canadian Pain Coalition has also been assisting us in the promotion of this series. The three series are partially funded by the Province of BC through the Direct Access/Community Gaming Grants. These webinars have had a tremendous response from people with pain, their families and support system, as well as health professionals

EXECUTIVE DIRECTOR'S REPORT

Continued...

seeking up-to-date information for their patients. The series has also provided an opportunity for the creation of new programming by some of the community partners. For instance, on Vancouver Island one of the regional health centres offered to host a group of clients for the webinar. The webinar provided them additional resources and an educational focus around which to bring their clients (mostly those dealing with chronic pain) together.

We received comments and feedback from post seminar surveys completed by program participants as well as unsolicited feedback. We have provided a sample of comments below:

- I just wanted to thank you for offering these helpful and informative webinars. The timing is perfect - not too early in the day, perfect length of time (an hour), allowing a week in between sessions so that we can catch up if we are unable to attend the live session (due to pain), as well as offering them free of charge, which can be a barrier to so many people. Your hard work is greatly appreciated. (Port Coquitlam, BC)
- I just finished viewing the Is Pain All in Your Brain webinar. I thought Dr.Cervero was just fantastic in his explanation of pain. I've never heard better from anyone; not a doctor, specialist, or pain clinic. If anybody is new to pain he certainly made it easy to understand. Thank you CIRPD for bringing on real experts. (New Westminster, BC)
- You are continuing to do such a great job of finding such knowledgeable speakers for those of us that tune into your factual, interesting webinars. I really wanted to let you know how much I benefitted from Dr. Francis Keefe's Webinar on Coping With Persistent Pain - Current State of The Science. What a phenomenal speaker! I could've listened to him & learned from his talk all day! In fact, I leave your Webinars feeling this good about what I've learned 99% to 100% of the time. (West Vancouver, BC)
- I have never taken such an information-packed hour of training before, and I loved it! I learned a lot. Thank you. (Kelowna, BC)
- Thanks so much for giving me the opportunity to be part of this webinar on pain. I found it to be very interesting and informative. I am planning to apply some of the ideas I have learned on breathing and sleep. (West Vancouver, BC)
- I think you and your team put on a totally successful program. As a retired nurse educator and a person now living with chronic back pain, I found your format of audio/powerpoint presentations, assigned videos and practice and Q & A opportunities effective and stimulating. I appreciated your reminders and both live audience and pre Webinar question opportunities. Thank you all for such a great learning opportunity in an easy to access format- a job well done! (Delta, BC)
- Thank you so much to both of you for such a great program, it is very much appreciated and has been quite helpful in my pain control. I have enjoyed the yoga and all the information from [Neil] on this webinar. (Prince George, BC)
- Thank you so much to Neil, yourself and all of the other people and organizations who made this webinar series possible. I've learned a lot - I have more understanding of my pain and tools to deal with it. I also have hope which was low for me. (Nanaimo, BC)
- I am so thankful for all the videos you folks have put together and all the health care professionals you've found and brought into my living through webinar. I have learned so much and it's helping with coping with my chronic pain. Thank you, Thank you, and Thank you! (Richmond, BC)

EXECUTIVE DIRECTOR'S REPORT

Continued...

WhiplashPrevention.org – Update

In 2012, we received funding support from UBC's Work Summer Study Program for student participation in the "whiplashprevention.org" website updates and events. We hired Julia Patey who was completing her Bachelor in Fine Arts and Film Production. Julia helped us organize the Whiplash Prevention Video Contest. We had terrific media coverage including three newspaper articles, television news coverage and online publicity for the Whiplash Prevention Project. 24 Hours Vancouver, one of the contest sponsors provided an online venue for the video upload and voting. Other lead contest sponsors included 730AM, Insurance Corporation of British Columbia, Festival Cinemas and Auto21 (see website for full list of sponsors). There were 8 videos submitted for the contest. The winner was Jenna Hambrook, a film student from UBC. To view her video you can visit: <http://www.whiplashprevention.org/FilmContest/Pages/PublicVoting.aspx>

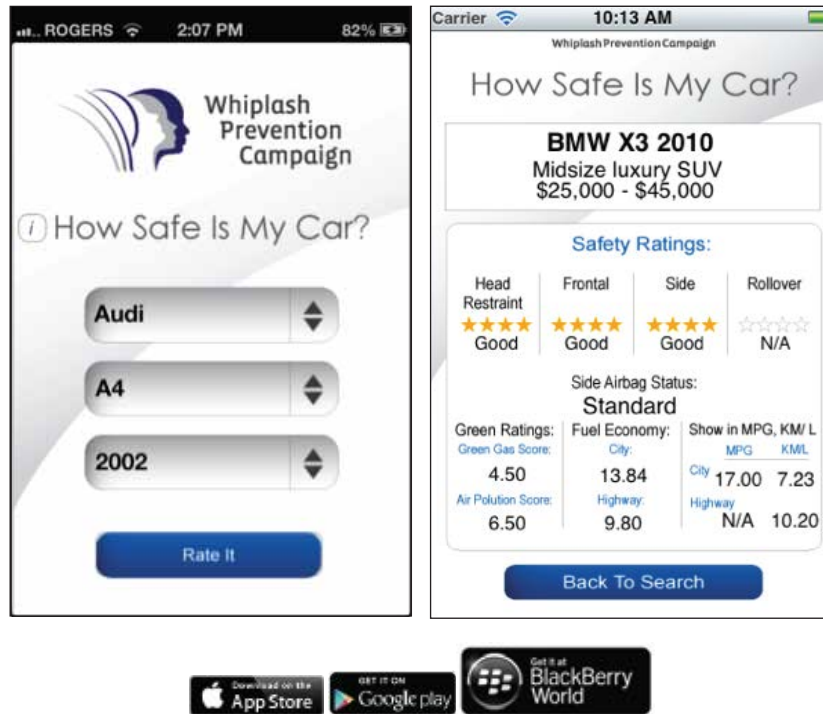
We would like to extend our thanks to our judges for the competition:

- Alexandra Barrow, Assistant Editor, Youthink
- Erica Bulman, Editor-in-Chief, 24 Hours, Vancouver
- Ediriweera Desapriya, Research Associate, BC Injury & Prevention Unit
- Diane MacKay, Manager of Road Safety Programs, Insurance Corporation of British Columbia
- Doug Romilly, Professor, UBC - Mechanical Engineering
- Lance Saunders, Managing Director, Executive Vice President, DDB Canada, Vancouver
- Zack Spencer, Automobile Journalist
- Alvin Wasserman, President, Wasserman & Assoc.
- Marc White, Executive Director, CIRPD

EXECUTIVE DIRECTOR'S REPORT

Continued...

Whiplash Prevention Phone Apps Launched



I would like to thank our App Team for working with me to launch our free Smart Phone Apps to help consumers and businesses consider safety when purchasing or leasing vehicles as well as gas mileage and pollution scores. Specifically I would like to thank Louie Yuen, in collaboration with Tonya Hyde, Mehmet Ali Vural, Martin Prijatna (The Brand Room). Carson Lam programmed the Android and Blackberry app versions.

We designed this app to help people quickly and easily find their car's safety rating, green rating, and price range. This can either inform you about the safety of your current vehicle, or can help you make a decision about which car you should purchase next. The SafeCar app is available for free for iPhone, Android, and soon BlackBerry phones.

Prevention Phone Apps Launched

EXECUTIVE DIRECTOR'S REPORT

Continued...

The SafeCar app pulls safety ratings, green ratings and pricing information from our online vehicle rating tool. This online tool pulls the data from three sources:

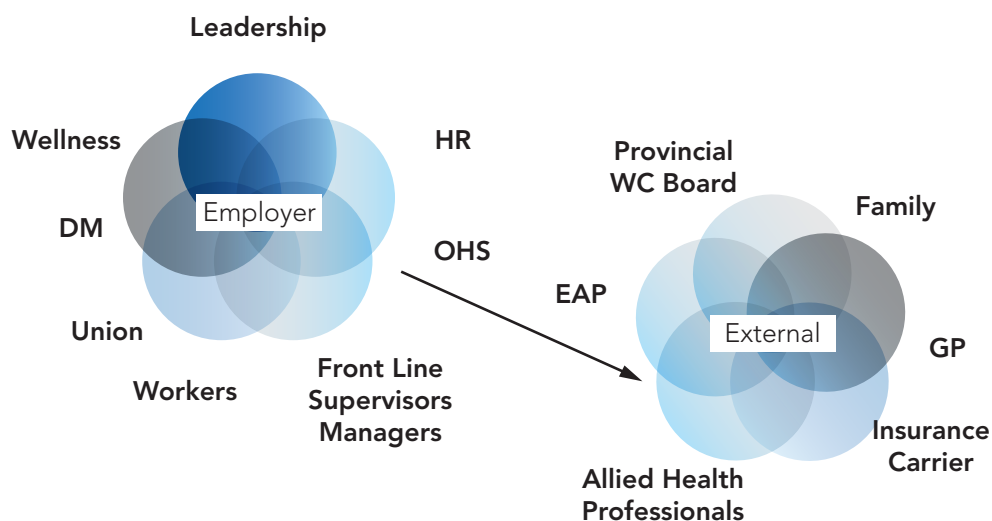
- Safety Ratings are obtained from Insurance Institute of Highway Safety (IIHS) and are based on four rating categories: Head Restraint Rating, Frontal Impact, Side Impact, and Rollover test.
- Green Ratings and Fuel Economy information are obtained from the US Environmental Protection Agency (EPA). Green Ratings are rated with scores ranging from 0 to 10, where 10 is the best. Mileage estimates are meant to be used in comparison with other vehicles. Actual mileage will vary.
- Vehicle Prices are obtained from Canadian Black Book and have been gathered into searchable ranges. Price Ranges are meant to be used for estimation only.

Health and Work Productivity Web-Portal Update

The Health and Work Productivity Web-Portal (HWP-Portal) project's purpose is to reduce the gap between what is known from high quality research and what is done in policy, training and practice in regard to disability prevention, disability management and work productivity. A primary goal of the project is to facilitate and sustain safe, psychologically healthy, accommodating and productive workplaces.

A challenge to obtaining this goal is the number of stakeholders who have different roles and responsibilities in the disability prevention, disability management and work productivity areas and the lack of a common evidence-base to inform decision-making and best practices.

Figure 1. Stakeholders involved in disability prevention and management (created by Doug Kube)



EXECUTIVE DIRECTOR'S REPORT

Continued...

The HWP-Portal is a major project involving many academic researchers and community stakeholder volunteers. Phase I of the program involved two years of work creating technical specifications for the project, a nine month bidding and tendering process, and two years of programming and function testing. We were very fortunate in receiving both in-kind support from many companies including Microsoft Canada, Peer 1 Hosting, TeliPhone, Avepoint, Atlassian, and Fluids Surveys. This year Microsoft Canada donated \$24,650 via in-kind contribution to the HWP project.

Over the past two years we received funding support from Healthcare Benefit Trust, Canadian Institutes of Health Research, and WorkSafe BC. The WorkSafeBC funding arose from two successful competitive grants from WorkSafeBC – Innovation at Work program which have contributed greatly to the project development. The first grant supported a proof of principle project to test paper-based workflows for the scientific and stakeholder review process. As part of this proof of principle project the academic and community stakeholder partnership conducted a stakeholder-centred best evidence synthesis of systematic reviews that identified risk and protective factors contributing to work absence across health conditions. The first project involved academic researchers from the faculties of medicine, health sciences and education at the University of British Columbia, faculties of health sciences and education at the University of Northern British Columbia; faculty of business at Simon Fraser University. Community stakeholders included the BC Construction Safety Alliance, Healthcare Benefit Trust, The FIOSA-MIOSA Safety Alliance of BC, Health Employers of British Columbia.

The second grant utilized the findings from the first study to conduct a stakeholder-centred, best-evidence synthesis of systematic reviews to identify interventions that are more likely to positively address modifiable risk and protective factors across health conditions and occupations. The second project involved academic researchers from faculties of medicine, health sciences and education at the University of British Columbia, faculties of health sciences and education at the University of Northern British Columbia; Faculty of Medicine, Université Laval and Faculty of Management at Lethbridge University. Community stakeholders included the BC Construction Safety Alliance, Healthcare Benefit Trust, The FIOSA-MIOSA Safety Alliance of BC, Health Employers of British Columbia and Stantec Inc.

Once the synthesis is completed, published findings from these projects will be hosted on the Health and Work Productivity Web-Portal.

We have recently created an open LinkedIn Health and Work Productivity Portal (HWP Portal) interest group. The purpose of the open LinkedIn group is to introduce the portal to a wider audience. This will help gauge the interest in the project and greatly expand our network of connections. The open group will become the “beta-testers” for the portal.

Lisa Mighton, CIRPD's Knowledge Translation specialist, has been identifying key researchers who could make a contribution to the HWP-Portal and our Webinar Series. Tonya Hyde has been using this list and identifying industry leaders or senior OHS/HR professionals and inviting them to join our Health and Work Productivity LinkedIn group. During this next year we will be offering webinar orientations to academic researchers and work and health research centres to join the scientific committee, as well as professional organization stakeholders representing Occupational Health and Safety, Human Resources, Health Professionals, Employers and Labour, and Public/Private Insurers. You can join the LinkedIn special interest group by searching for Health and Work Productivity under Interests > Groups.

EXECUTIVE DIRECTOR'S REPORT

Continued...

Isocyanates and Health: Past, Present and Future Conference & Research Planning Workshop

April 3-5, 2013

Isocyanates are widely used across industry sectors including foam manufacturing, forestry, painting, adhesives, spray foam insulation for consumer, hospital/healthcare and military purposes. Exposure to isocyanates is a leading cause of occupational asthma. International, federal, provincial and territorial regulators and policy-makers have initiated new regulations concerning isocyanates and are seeking credible high quality research to inform future decisions.

On April 3-4th, 2013 CIRPD hosted an international multidisciplinary conference entitled, *Isocyanates and Health: Past, Present and Future* with a follow up Research Agenda planning workshop on April 5th, 2013, in Potomac, Maryland. The purpose of the conference and follow up workshop were to (i) identify and discuss the latest knowledge and important issues on the health effects of isocyanates, including current best evidence about exposure monitoring, environmental controls and clinical management, and (ii) identify and discuss knowledge and research gaps to inform future research priorities and information dissemination.

The conference and workshop identified important knowledge gaps and research priorities to better understand and prevent potential adverse health consequences from exposure to isocyanates. A manuscript has been drafted by the Section Chairs and has been circulated to the larger Scientific /Planning committee for their review and input. The manuscript will then be circulated to conference delegates prior to being finalized for submission early next year to the Journal of Occupational and Environmental Medicine. It is hoped that the Isocyanate and Health Conference and the published manuscript will lead to greater collaboration across government, academic, industry and worker organizations to advance research and knowledge regarding isocyanate exposures and health effects, and lead to improved preventive measures.

We would like to thank the scientific leadership for the conference.

Scientific Chair

James Lockey MD, MS, Conference Professor, Department of Environmental Health, Division of Occupational and Environmental Medicine and Pulmonary Division, Department of Internal Medicine, University of Cincinnati College of Medicine.

Section Chairs

Worker and Consumer Exposure, Section Co-Chairs

Andrew Comai, MS, International Representative, Health & Safety Department, United Auto Workers Union

Andrea Pfahles-Hutchens MS, Epidemiologist, Risk Assessment Division, Office of Chemical Safety and Pollution Prevention (OCSPP), US Environmental Protection Agency

EXECUTIVE DIRECTOR'S REPORT

Continued...

Human Cancer Risk, Section Chair

Gary L. Ellison PhD, MPH, Epidemiologist/Program Director, Modifiable Risk Factors Branch, Epidemiology and Genomics Research Program (EGRP), Division of Cancer Control and Population Sciences, National Cancer Institute

Toxicology/Animal Models /Biomarkers, Section Chair

Pertti (Bert) J. Hakkinen PhD, Acting Head, Office of Clinical Toxicology, and Senior Toxicologist, and Toxicology and Environmental Health Science Advisor (to the Director), Specialized Information Services, National Library of Medicine, National Institutes of Health; Adjunct Associate Professor in Biomedical Informatics Uniformed Services University of the Health Sciences

Occupational Health Surveillance/Management, Section Co-Chairs

Philip Harber MD, MPH, Professor of Public Health, University of Arizona College of Public Health; Professor Emeritus, David Geffen School of Medicine, University of California in Los Angeles & **John Holland MD, MPH**, Occupational Medicine Consultant

Respiratory Epidemiology and Disease, Section Co-Chairs

Carrie Redlich MD, MPH, Professor of Medicine, Professor of Medicine (Occupational Medicine), Director, Occupational and Environmental Medicine Program, Yale University

Mark J. Utell MD, Professor of Medicine and Environmental Medicine, Director, Occupational and Environmental Medicine, University of Rochester Medical Center

Environmental Exposure/Monitoring, Section Chair

Robert P. Streicher PhD, Chief, Chemical Exposure and Monitoring Branch, Division of Applied Research and Technology, National Institute for Occupational Safety and Health, Centers for Disease Control and Prevention

EXECUTIVE DIRECTOR'S REPORT

Continued...

Acknowledgments

Special thanks to the many volunteers who have contributed to CIRPD projects this year:

Isocyanates and Health Conference Scientific Committee Members

Name	Title
Simon Aubin MSc, CIH	Scientific Professional, Laboratory Division. IRSST
Karl Auerbach MD, MBA	Managing Scientist, Exponent
John R Balmes MD	Professor of Medicine, School of Medicine, University of California, San Francisco
Xaver Baur MD	Professor of Medicine, University Medical Center Hamburg-Eppendorf, Chair for Occupational Medicine, Director of the Institute for Occupational and Maritime Medicine
Dhimiter Bello ScD, MSc	Assistant Professor, School of Health & Environment, Department of Work Environment, University of Massachusetts, Lowell
David Bernstein MD, FACP	Professor of Clinical Medicine and Environmental Health; Co-director Allergy Fellowship Training Program, Division of Immunology, Allergy & Rheumatology, University of Cincinnati, College of Medicine
Janet Carter	Senior Health Scientist, Directorate of Standards and Guidance, Occupational Safety & Health Administration
James J. Collins PhD	Director of Epidemiology, Dow Chemical Company
Patrick Conner MD	Corporate Medical Director, BASF Corporation
Kathleen Ernst	Research Chemist, Chemical Exposure and Monitoring Branch, Division of Applied Research and Technology, National Institute for Occupational Safety and Health, Centers for Disease Control and Prevention
Claude Emond MSc, PhD	Toxicologist, Researcher and Consultant, Clinical Adjunct Professor, Department of Environmental and Occupational Health, Université de Montréal
David Fishwick MB, ChB, MRCP (UK), AFOM, MD	Co-director and Clinical Director, Centre for Workplace Health, Sheffield Thoracic Institute, University of Sheffield
George Charles Fonger	Technical Information Specialist/Senior Biologist, Office of Clinical Toxicology, Division of Specialized Information Services, National Library of Medicine, National Institutes of Health
Armen Ghazarian, MPH	Cancer Research Training Award Fellow, Modifiable Risk Factors Branch, Epidemiology and Genomics Research Program, Division of Cancer Control and Population Sciences, National Cancer Institute
Julie E. Goodman PhD, DABT	Principal, Gradient Environmental Consultants
Terry Gordon PhD	Chair, Threshold Limit Values for Chemical Substances Committee, American Conference of Industrial Hygienists
Cynthia Graham PhD	Toxicology Principal, Huntsman LLC
Carol Hetfield USEPA	Senior Advisor Economics, Exposure and Technology Division, Office of Pollution Prevention & Toxics, Environmental Protection Agency

EXECUTIVE DIRECTOR'S REPORT

Continued...

Name	Title
Vikas Kapil DO, MPH, FACOEM	Chief Medical Officer & Associate Director for Science, National Center for Environmental Health & Agency for Toxic Substances & Disease Registry, Centers for Disease Control and Prevention
Brian Karlovich CIH, CSP	Product Safety & Regulatory Affairs, Bayer Material Science
Gerald L Kennedy Jr. DABT	Toxicologist, DuPont
Catherine Lemiere MD, MSc	Professor, Department of Medicine and Department of Environmental Health and Workplace Health, Université de Montréal
Gary Liss MD MS, FRCPC	Assistant Professor, Gage Occupational and Environmental Health Unit, Dalla Lana School of Public Health, University of Toronto; Consultant with Ontario Ministry of Labour
Andrew Maier PhD, CIH, DABT	Director, Toxicology Excellence for Risk Assessment (TERA)
Karen Mattson	Senior Principal Scientist, Bayer Material Science
Aubrey Miller MD, MPH	Senior Medical Advisor, NIH/National Institute of Environmental Health Sciences
Asish Mohapatra MSc, Mhpil, EMC, Risk Cert.	Regional Health Risk Assessment and Toxicology Specialist, Contaminated Sites, Environmental Health Program, Regions and Programs Branch, Health Canada
Benoit Nemery MD, PhD	Professor of Toxicology & Occupational Medicine, Chair, Department of Public Health, Universiteit Leuven
A. Martin Nicholas PhD	Head, Public Awareness, Surveillance and National Compliance Coordination Chef, National Office of the Workplace Hazardous Materials Information System, Health Canada
Leena A Nylander-French PhD, CIH	Professor of Occupational and Environmental Health, University of North Carolina at Chapel Hill, Department of Environmental Sciences and Engineering, Gillings School of Global Public Health
Lyn Penniman RN, MPH	Director, Office of Physical Hazards and Others, Occupational Safety & Health Administration, US Department of Labor
Ken Rosenman MD, MSU	Chief, Division of Occupational and Environmental Medicine, Professor of Medicine, Division of Occupational and Environmental Medicine, Michigan State University
Nura Sadeghpour	Editor in Chief, CCC Newsletter, NIOSH Office of Health Communication & Global Collaboration
Ronald Shiotsuka PhD, DABT	Head of Toxicology BMS-NAFTA, Bayer Material Science
Debra Silverman ScD, ScM	Chief, Occupational and Environmental Epidemiology Branch, Division of Cancer Epidemiology and Genetics, National Cancer Institute
Gunnar Skarping PhD	Professor, Department of Analytical Chemistry, Work Environment Chemistry Division, Stockholm University
Mark W. Spence MS, CIH	Scientific Director, International Isocyanate Institute

EXECUTIVE DIRECTOR'S REPORT

Continued...

Name	Title
Eileen Storey, MD, MPH	Chief, Surveillance Branch, Division of Respiratory Disease Studies, National Institute for Occupational Safety and Health, Centers for Disease Control and Prevention; Professor Emeritus, Department of Medicine, School of Medicine, University of Connecticut; Adjunct Professor of Community Medicine, School of Medicine, West Virginia University
Susan M Tarlo FRCPC, MBBS	Professor, Dept. of Medicine and Dalla Lana School of Public Health, University of Toronto; Staff Physician, Respiratory Division, University Health Network and St. Michael's Hospital
Erik Vangronsveld	PU IH Technical & EHS Issue Manager, Huntsman Corporation
Gail Weinmann MD	Deputy Director, Division of Lung Diseases, National Heart, Lung, and Blood Institute
Lynn Wilder PhD, CIH Associate	Director for Science (Acting), Division of Community Health Investigations (Proposed), Agency for Toxic Substances and Diseases Registry
Adam V. Wisnewski PhD	Senior Research Scientist, Occupational Medicine, Yale School of Medicine

Interventions to Reduce Work Absence Project (funded by WorkSafeBC and Healthcare Benefit Trust)

Name	Title
Sharon Dent	Team Leader, Rehabilitation Services, Healthcare Benefit Trust
Clermont Dionne	Professor, Department of Rehabilitation, Laval University
Henry Harder	Professor, School of Health Sciences , University of Northern British Columbia
Vernita Hsu	Injury Management Coordinator, BC Construction Safety Association
Corinne Koehn	Counselling Coordinator, University of Northern British Columbia
Iris Lama	Director of Rehabilitation Services, Healthcare Benefit Trust
Romana Pasca	Graduate Student, University of British Columbia
Werner Schulz	Retired, Formerly with Healthcare benefit Trust
Izabela Schultz	Professor, Department of Educational and Counseling Psychology, University of British Columbia
Julie Slater	Team Leader, Rehabilitation Services, Healthcare Benefit Trust
Shannon Wagner	Professor, Department of Health Sciences, University of Northern British Columbia
Kelly Williams-Whitt	Professor, Management, University of Lethbridge

EXECUTIVE DIRECTOR'S REPORT

Continued...

Office Volunteers

Name	Activity
Dragana Pavlovic	CRM Database Organization
Douglas Payne	Accounting and data entry

IT Volunteers

Name	Activity
Ash Arokiaswamy	IT Networking
Matt Tobin	IT Networking

**CANADIAN INSTITUTE FOR THE
RELIEF OF PAIN AND DISABILITY**

Vancouver, B.C.

FINANCIAL STATEMENTS

June 30, 2013 and June 30, 2012

REVIEW ENGAGEMENT REPORT

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

We have reviewed the balance sheets of Canadian Institute for the Relief of Pain and Disability as at June 30, 2013, June 30, 2012 and July 1, 2011, and the statements of operations and changes in net assets and cash flows for the years ended June 30, 2013 and June 30, 2012. Our reviews were made in accordance with Canadian generally accepted standards for review engagements and, accordingly, consisted primarily of inquiry, 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 reviews, 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 accounting standards for not-for-profit organizations.

Wolrige Mahon LLP

CHARTERED ACCOUNTANTS

Vancouver, B.C.
November 19, 2013

CANADIAN INSTITUTE FOR THE RELIEF OF PAIN AND DISABILITY

STATEMENTS OF OPERATIONS AND CHANGES IN NET ASSETS

(unaudited)

For the years ended June 30, 2013 and 2012

	2013 \$	2012 \$
Revenue		
Community gaming grant (Note 5)	230,700	156,661
Other grants (Note 5)	87,405	161,070
Symposia and conferences	55,744	-
Other income	13,455	27,951
	<u>387,304</u>	<u>345,682</u>
Expenditures		
Advertising	271	1,992
Amortization	17,810	15,047
Bank charges and interest	1,293	989
Consulting and other project costs	99,379	46,329
Donation	1,084	1,064
Dues and memberships	590	656
Grant awards and expenses	2,173	5,500
Insurance	2,850	3,411
Meals and entertainment	645	1,188
Office and general	46,568	21,590
Professional fees	12,180	12,815
Rent	12,711	15,193
Symposia and conferences	38,048	1,269
Telecommunications	9,647	3,749
Travel	5,638	5,469
Wages and benefits	147,420	162,101
	<u>398,307</u>	<u>298,362</u>
Excess (deficiency) of revenues over expenditures	(11,003)	47,320
Net assets, beginning	12,890	(34,430)
Net assets, ending	1,887	12,890

CANADIAN INSTITUTE FOR THE RELIEF OF PAIN AND DISABILITY

BALANCE SHEETS

(unaudited)

June 30, 2013 and 2012 and July 1, 2011

	June 30, 2013 \$	June 30, 2012 \$	July 1, 2011 \$
Assets			
Current			
Cash	16,691	1,711	15,939
Cash held in trust	-	-	4,541
Restricted cash	105,634	150,088	100,967
Receivables	14,223	19,774	43,133
Prepaid expenses	5,470	2,682	4,981
	<u>142,018</u>	<u>174,255</u>	<u>169,561</u>
Property and equipment (Note 4)	22,680	22,156	15,929
	<u>164,698</u>	<u>196,411</u>	<u>185,490</u>
Liabilities			
Current			
Payables and accruals	7,134	4,026	26,494
Deferred contributions (Note 5)	148,759	179,495	193,426
Current portion of capital lease obligation (Note 6)	2,497	-	-
	<u>158,390</u>	<u>183,521</u>	<u>219,920</u>
Long-term portion of capital lease obligation (Note 6)	4,421	-	-
	<u>162,811</u>	<u>183,521</u>	<u>219,920</u>
Net Assets	1,887	12,890	(34,430)
	<u>164,698</u>	<u>196,411</u>	<u>185,490</u>

Approved by Directors:

CANADIAN INSTITUTE FOR THE RELIEF OF PAIN AND DISABILITY

STATEMENTS OF CASH FLOWS

(unaudited)

For the years ended June 30, 2013 and 2012

	2013 \$	2012 \$
Cash flows related to operating activities		
Excess (deficiency) of revenues over expenditures	(11,003)	47,320
Adjustments for items not affecting cash:		
Amortization	17,810	15,047
In-kind donation	(3,607)	(21,274)
	3,200	41,093
Changes in non-cash working capital:		
Receivables	5,551	23,359
Prepaid expenses	(2,788)	2,299
Payables and accruals	3,108	(22,468)
Deferred contributions	(30,736)	(13,931)
	(21,665)	30,352
Cash flows related to financing activities		
Repayment of capital lease	(7,809)	-
Net increase (decrease) in cash	(29,474)	30,352
Cash, beginning	151,799	121,447
Cash, ending	122,325	151,799
Cash represented by:		
Cash	16,691	1,711
Restricted cash	105,634	150,088
	122,325	151,799

CANADIAN INSTITUTE FOR THE RELIEF OF PAIN AND DISABILITY

NOTES (unaudited)

For the years ended June 30, 2013 and 2012

The Canadian Institute for the Relief of Pain and Disability (the "Institute") was incorporated in 1985 under Part II of the Canada Corporations Act, is a registered charitable organization for income tax purposes and is exempt from income taxes. The Institute is committed to the prevention and reduction of pain, pain-related suffering and disability through the creation and dissemination of evidence-informed best practices.

As a registered not-for-profit organization, the Institute is dependent on various government, foundation, and corporate entities for grants and donations to subsidize operations. The Board of Directors is confident that support from these entities will continue throughout the next fiscal year.

Note 1 Significant Accounting Policies

These financial statements have been prepared in accordance with Canadian accounting standards for not-for-profit organizations ("ASNPO") and include the following significant accounting policies:

Financial Instruments

Measurement of financial instruments

The Institute measures its financial assets and financial liabilities at fair value at the acquisition date, except for financial assets and financial liabilities acquired in related party transactions. Transaction costs related to the acquisition of financial instruments subsequently measured at fair value are recognized in excess (deficiency) of revenues over expenditures when incurred. The carrying amounts of financial instruments not subsequently measured at fair value are adjusted by the amount of the transaction costs directly attributable to the acquisition of the instrument.

The Institute subsequently measures all of its financial assets and financial liabilities at amortized cost.

Impairment

Financial assets measured at amortized cost are assessed for indications of impairment at the end of each reporting period. If impairment is identified, the amount of the write-down is recognized as an impairment loss in excess (deficiency) of revenues over expenditures. Previously recognized impairment losses are reversed when the extent of the impairment decreases, provided that the adjusted carrying amount is no greater than the amount that would have been reported at the date of the reversal had the impairment not been recognized previously. The amount of the reversal is recognized in excess (deficiency) of revenues over expenditures.

Cash Held in Trust

Cash held in trust represents cash being held for the Institute's benefit by another party until the Institute requires the cash to fund health, safety and injury prevention research for which the funding was provided.

CANADIAN INSTITUTE FOR THE RELIEF OF PAIN AND DISABILITY

NOTES
(unaudited)

For the years ended June 30, 2013 and 2012

Note 1 Significant Accounting Policies (continued)

Restricted Cash

Restricted cash represents cash from the British Columbia Government's Direct Access Program. These funds may only be spent to cover eligible costs as described in Note 5.

Property and Equipment

Property and equipment are carried at cost less accumulated amortization. Amortization is calculated annually as follows:

Computer equipment	- 30%	declining balance
Computer equipment under capital lease	- 30%	declining balance
Furniture and equipment	- 20%	declining balance
Computer software	- 2	years straight line

except in the year of acquisition, at which time amortization is provided for at one-half the annual rate.

Revenue Recognition

The Institute follows the deferral method of accounting for contributions. Restricted contributions received for expenditures that will be made in the future are initially recorded as deferred contributions and are recognized as revenue in the same period as the related expenditures. 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. Symposia contributions are deferred until the event is held.

Contributed Services and Materials

A number of volunteers contribute a significant amount of their time and services to the Institute each year. Because of the difficulty in determining fair value, these contributed services are not recognized in the financial statements. The Institute records the fair value of contributed materials at the time of receipt, where such fair value is determinable, and the materials would otherwise have been purchased.

Use of Estimates

The preparation of financial statements in conformity with Canadian accounting standards for not-for-profit organizations requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities at the date of the financial statements and the reported amounts of revenues and expenses during the reporting period. Actual results could differ from those estimates.

CANADIAN INSTITUTE FOR THE RELIEF OF PAIN AND DISABILITY

NOTES (unaudited)

For the years ended June 30, 2013 and 2012

Note 2 Impact of the Change in the Basis of Accounting

These financial statements are the first financial statements of the Institute prepared in accordance with ASNPO. The Institute adopted ASNPO in accordance with the *Canadian Institute of Chartered Accountants ("CICA") Handbook* Section 1501, First-Time Adoption by Not-For-Profit Organizations. In accordance with ASNPO, the Institute has:

- applied the same accounting policies throughout all periods presented; and
- retrospectively applied effective ASNPO standards as of July 1, 2011, as required

The adoption of ASNPO had no impact on the previously reported assets, liabilities and net assets of the Institute and, accordingly, no adjustments have been recorded in the comparative balance sheets, statement of operations and changes in net assets and statement of cash flows. Certain disclosures included in these financial statements reflect the new disclosure requirements of ASNPO.

Note 3 Financial Instruments

Items that meet the definition of a financial instrument include cash, cash held in trust, restricted cash, receivables, payables and accruals and capital lease obligation. It is management's opinion that the Institute is not exposed to significant liquidity risk arising from these financial instruments.

Credit risk

Credit risk is the risk that one party to a financial instrument will cause a financial loss for the other party by failing to discharge an obligation. The Institute is exposed to credit risk in connection with its receivables. The Institute provides credit to its clients in the normal course of its operations.

Market risk

Market risk is the risk that the fair value or future cash flows of a financial instrument will fluctuate because of changes in market prices. Market risk comprises three types of risk: currency risk, interest rate risk and other price risk. It is management's opinion that the Institute is not exposed to significant other price risk.

Currency risk

Currency risk is the risk that the fair value or future cash flows of a financial instrument will fluctuate because of changes in foreign exchange rates. The Institute undertakes transactions in foreign currencies and, consequently, certain of its financial instruments are exposed to foreign currency fluctuations. Financial instruments include the following amounts, presented in Canadian dollars, which are denominated in foreign currencies:

	2013 \$	2012 \$
Cash	(242)	5,195

CANADIAN INSTITUTE FOR THE RELIEF OF PAIN AND DISABILITY

NOTES (unaudited)

For the years ended June 30, 2013 and 2012

Note 3 Financial Instruments

Interest rate risk

Interest rate risk is the risk that the fair value or future cash flows of a financial instrument will fluctuate because of changes in market interest rates. Fixed-interest and non-interest bearing financial instruments are subject to changes in fair value, while floating rate financial instruments are subject to fluctuations in cash flows. The Institute is exposed to interest rate risk with respect of its capital lease obligation.

Note 4 Property and Equipment

	Cost \$	2013 Accumulated Amortization \$	Net \$	2012 Net \$
Computer equipment	49,016	43,017	5,999	8,569
Computer equipment under capital lease	14,727	2,209	12,518	-
Furniture and equipment	31,357	28,997	2,360	2,950
Computer software	24,881	23,078	1,803	10,637
	<u>119,981</u>	<u>97,301</u>	<u>22,680</u>	<u>22,156</u>

During the year the Institute received \$3,607 in donated software which has been recorded as other income and computer software.

Note 5 Deferred Contributions

Deferred contributions represent unspent resources for education and research purposes. These resources will be used in subsequent periods. Direct access grants must be used to cover eligible costs essential for the direct delivery of an approved program within the community. All other project grant funds are restricted by the terms and conditions established by grantors related to project deliverables.

	2012 Deferred \$	Received \$	Earned \$	2013 Deferred \$
Community gaming grants	154,440	200,000	230,700	123,740
Other grants	25,055	87,369	87,405	25,019
	<u>179,495</u>	<u>287,369</u>	<u>318,105</u>	<u>148,759</u>

CANADIAN INSTITUTE FOR THE RELIEF OF PAIN AND DISABILITY

NOTES (unaudited)

For the years ended June 30, 2013 and 2012

Note 6 Capital Lease Obligations

	2013 \$	2012 \$
Agreement with Dell Financial Services Canada, that bears interest at 4.53% per annum and requires monthly payments of \$229.31 to February 22, 2016	6,918	-
Less: Current portion	2,497	-
	<u>4,421</u>	<u>-</u>

The total interest paid on capital lease obligations during the year was \$184 (2012: \$-).

Future minimum lease payments under capital lease obligations are:

	\$
2014	2,759
2015	2,759
2016	1,839
	<u>7,357</u>
Total minimum lease payments	7,357
Less: Amount representing interest	439
	<u>6,918</u>
Balance of obligations	6,918
Less: Current portion	2,497
	<u>4,421</u>

Note 7 Endowment Fund - Ian A. Barclay Chronic Pain Fund

In 1996, the Institute established with the Vancouver Foundation a permanent open endowment fund called the Ian A. Barclay Chronic Pain Fund (the "Fund"). The Institute contributed \$45,000 of capital to the Fund. The capital of the Fund is held permanently and invested by the Vancouver Foundation.

The Institute does not reflect the Fund in its financial statements because it lacks discretion over the expenditure and investment of the capital of the Fund. The quoted market value of securities underlying the Fund's capital as at June 30, 2013 is \$38,763 (2012: \$36,495). The Institute has decided to reinvest investment income earned to increase the market value of the endowment back to the original contribution value.