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HEAD INJURED
RELEARNING SOCIETY

Annual Report
April 1, 2002 - March 31, 2003

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April 1, 2002 ñ March 31, 2003

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The President and the Executive Director are members of all committees on an ex-officio basis.

Our mission is to facilitate the self-determination, community integration and well-being of individuals with acquired brain injury.

Our vision is to be recognized as developer and provider of leading-edge, effective and innovative programs in the treatment and support of individuals who have acquired a brain injury.

Another year in review, which seems to come and go with the blink of an eye. The Board, as always, are focused on the needs of our clients. This leads to seeing the bigger picture that is faced by these folks and thus our desire to expose to government and the community the multitude of gaps in services that they need.

The services covered by BIRC go beyond the funding extended to our organization by the CHR. Obviously our involvement in fund raising is a must. Each year securing funds seems harder than the last. The Board has been adamant that the programs continue and happily we are able to look ahead for at least one more year with funding in place. However, this hand to mouth existence puts enormous stress on all concerned, especially our senior staff.

Our caring and dedicated staff understand first hand the anxiety that clients and their families feel because of the gaps in services outside our purview. This year has seen a major effort on our

part to work closely with the CHR. Once having opened the door, our Executive Director is now part of their Brain Injury Strategy Working Group that hopefully will identify the appropriate role for health in the delivery of services. If the provincial government is listening, this should then lead to other departments realizing their roles in filling the gaps. It always boils down to funding.

We are proud of the work done by staff, especially the Executive Director who continues to play an important role with other brain injury organizations that are working with the Community Development Department initiative to enhance services and opportunities for those who are/or could participate in community life. The commitment to this initiative, which has many phases, is enormous and far beyond what can be sustained in the longer term. The time expended outside his regular role as our Executive Director goes far and beyond the call of duty. However, on a positive

note there is a sense that the eyes and ears of the government and many communities are opening to the needs of this long neglected group of people. Hopefully this will translate into new programs.

Our Board acknowledges and thanks the staff for their commitment to the brain injured. I, especially, thank my fellow board members for their support and cooperation. Along with the staff, you do make a difference in the lives of many. The following quotation seems appropriate: "Life is not measured by the number of breaths we take but by the moments that take our breath away."

As we celebrate the achievement each year of those completing our program, I hear of their triumphs in facing the huge hurdles from the impacts of their injuries. These moments take my breath away. I hope it is true for all of you who are part of the lives of these special people.

Connie Ostermann
President

Perhaps the best way to describe the 2002-2003 fiscal year for the Head Injured Relearning Society and its primary operating division, the Brain Injury Rehabilitation Centre, is that it was a year when much of the organization's efforts were focused on dealing with the bigger brain injury picture.

As noted and alluded to in many previous Annual Reports of the Society, many of the solutions to adequately addressing the needs of individuals with brain injuries lie beyond the immediate grasp or control of this particular agency. This becomes decidedly evident when communications with other agencies, both within the city and elsewhere throughout the province serving individuals with brain injuries, reveal that their services too have been uncertain and in some cases tenuous because of the lack of appropriate funding commitment from critical funders. This climate has resulted in the significant redirection of essential agency efforts away from the direct delivery of services to a preoccupation with efforts to deal with larger systemic issues and even agency survival. To this end, the past year for the Head Injured Relearning Society was a year when significant efforts were taken to deal with those bigger issues. This commitment was undertaken in the belief that by dealing with those bigger issues the longer term and overall benefit of survivors of brain injury and their families could be advanced. Time will tell whether this strategy was a useful one or whether valuable time and effort may have been misdirected and perhaps better spent on dealing with those matters that were directly and immediately within the span and grasp of the organization. We sincerely hope that the former strategy was the correct one.

The "big picture" efforts of the organization are perhaps best represented in the form of three projects that were

funded by Alberta Community Development to the Head Injured Relearning Society as a trust agent for the Brain Injury Coalition of Calgary.

The first project of note was the continuation of a project started in the summer of 2001 through funding from Alberta Human Resources and Employment through its Summer Temporary Employment Program. Specifically, community member agencies of the coalition embarked on an effort to electronically catalogue their respective library collections using a common template and software system. The simple concept behind this project was that by having a common format, all the participating agencies could share their respective databases and thereby expedite access to the relevant information held by each agency. The funding from Alberta Community Development not only allowed the participating agencies to complete this work, but also to enlarge the number of participating agencies to several others in diverse corners of the province. Additionally, at the encouragement of Alberta Community Development each of the respective agency databases were able to be compiled and are now accessible via the Internet. The results of this work are visible at www.brainresource.ca.

A related but separate project, again funded by Alberta Community Development to the Head Injured Relearning Society as a trust agent for the Brain Injury Coalition of Calgary, was the development and/or improvement of participating agency websites. Since agencies are increasingly being "found" and "investigated" via the Internet, it follows that it is essential that they have a current and credible presence on the Web. To this end, funding was provided not only to facilitate website development amongst the Brain Injury Coalition community agency members, but also

amongst other provincial agencies. The results, again, are visible as linkages through the www.brainresource.ca website. In the context of this project it is notable that the www.brainresource.ca website itself was able to be constructed through this same project funding.

Perhaps the most notable "big picture" project with which the organization was involved during the past year was the Brain Injury Coalition of Calgary's Provincial Brain Injury Conference. As with the two previously noted projects, the Head Injured Relearning Society served as the trust agent for all financial aspects of the project. In addition, the Society, through its staff, provided significant input and support to the design and implementation of the conference. Although the conference itself was held early in the 2003-2004 fiscal year, the majority of effort and activity occurred during the 2002-2003 reporting year. Based on the feedback received, the conference was considered to be a great success not only because it highlighted the significant intellectual and service capital that exists within this province, but also because it brought together in one forum a cross section of the wide range of interests and perspectives in the field of brain injury - those interests and perspectives including survivors and their families, researchers, service providers, funders and policy makers, the legal community, insurers, and other interested parties. This meeting of stakeholders fostered a level of communication and sharing in the brain injury community across the province the likes of which has not been seen before. We are confident that this represents a new era of cooperation and understanding in this complex and challenging area. This important development would not have been possible without the significant funding support of Alberta Community Development. Special thanks are also

extended to Alberta Health and Wellness and the United Way of Calgary and Area for their funding assistance. Donor support was also gratefully received from Edward S. Pipella, and McNally Cumming Allchurch.

At the provincial level the organization was able to provide assistance directly to the Minister of Community Development by the Society's President serving as the Chairperson of the Minister's Interim Advisory Council on Brain Injury. We believe that it is critical that the Department of Community Development and the Minister remain connected to the realities of survivors and their families in the community and the services and expertise that are required to provide the necessary services and supports for these individuals. The Society will continue to support and advocate for appropriate input and monitoring of any new initiatives undertaken by the Department.

At a local level, the Society was also able to provide a variety of inputs and supports to the Calgary Health Region. Most notably, along with a variety of services, programs and agencies involved in the regional recovery continuum, the work of the Brain Injury Rehabilitation Centre was able to contribute to the Calgary Health Region being accredited by the Canadian Council on Health Services Accreditation not only for its brain injury services but for its entire regional services.

Following in part from the important conceptual and goal-setting work performed as a result of the preparations for accreditation, most recently our agency was invited by the Calgary Health Region to participate in a review of the regional brain injury continuum. Along with representatives from various CHR-funded community agencies, this Strategy Working group has undertaken to examine the continuum and to make recommendations to ensure the delivery

of effective and efficient services for individuals along the continuum from trauma through to community-based services. The work of this Group is anticipated to be completed sometime in the summer or early fall of 2003.

Other additional new collaborative efforts within the last year included a joint fund raising endeavour amongst the four major community-based service agencies of the Brain Injury Coalition of Calgary (notably ourselves, the Association for the Rehabilitation of the Brain Injured, the Southern Alberta Brain Injury Society, and Universal Rehabilitation Service Agency). The success of this initiative clearly demonstrated that in spite of differences among the agencies in service focus and donor and fund raising history, these four unique organizations could come together in the name of a common cause - that being to bring increased public visibility to the cause of brain injury.

The Brain Injury Rehabilitation Centre further demonstrated its commitment to addressing larger causes within a collaborative framework through its ongoing partnership with the Champions Career Centre - a collaborative effort amongst similar minded agencies, the corporate sector, and funders to enhance career and employment opportunities for individuals with disabilities in the community. Through the efforts of BIRC's Executive Director, who serves as the President of Champions Board of Directors, that organization was able to elect its first Board of Directors and to assume legal responsibility for a significant service contract from Alberta Human Resources and Employment. It was also able to provide important stewardship for additional donor amounts obtained from the corporate community.

In total, all of the above collaborative projects clearly demonstrate the power and achievements that are possible

through collaborative efforts. In this regard, we believe that the Head Injured Relearning Society through its operational arm the Brain Injury Rehabilitation Centre has set an important and high standard in working with others. We hope that this collaborative commitment will not serve to weaken the capacities and perceived competencies of the organization and be used opportunistically by funders and other agencies to strengthen their own positions or attend to more agency-centered efforts.

In addition to the foregoing collaborative efforts, the organization also linked with the community in several other ways. Amongst these were included a number of practicum and other learning opportunities for students from institutions of higher learning. Most notably, BIRC continued to host a variety of students from the University of Calgary, in particular those from the Faculties of Social Work and Education. A new initiative this year also included the development of a relationship with the Faculty of Engineering. A group of students worked collaboratively with the Centre's Occupational Therapist - Margaret Grant - to design an effective and easy to operate interface for electric stoves that would make stove use safe for those individuals with memory problems who might forget to turn off a burner or oven element.

At the organizational level, the Centre was relieved to enjoy a significant reduction in the rate of turnover of its staff. While the rate for the year continued to be a multiple of that enjoyed by such entities as the Society's major purchaser - the Calgary Health Region - it was a significant reduction from the over 100% turnover rate experienced within a recent 24-month period. The consequences of high turnover to survivors and other service

providers were commented on in a previous report.

During the last year the Centre continued to struggle with the uncertainty of not having a long-term facility or lease arrangement for its operations. The lack of a long-term contractual arrangement for service provision combined with the fluctuations in the rental market combined to re-direct the Centre's already limited resources into an extended search and negotiation strategy. Even so, the best arrangement that the Centre was able to establish was for a one-year term with its previous landlord. While a one year lease will provide a much-needed financial relief over the forthcoming year, unfortunately it leaves the Centre in a vulnerable position thereafter, and we will again be significantly distracted during the forthcoming year as we again attempt to deal with this ongoing uncertainty.

In spite of any uncertainties that the Centre must face due to external forces, it must also continue to strive to move ahead and to improve its services and systems. One such area of potential improvement that has been on the agency's list for many years is the installation of a computer network throughout the Centre. Through the funding assistance of an Anonymous donor during the last year the Centre was able to contract the Centre for Non-Profit

Management to conduct a technological review of the Centre's operations. This review made it possible to subsequently submit a successful funding proposal to the Muttart Foundation. The recommended system should be in place in the early summer of 2003.

These latter developments make it clear that the work of the Brain Injury Rehabilitation Centre could not proceed without the significant support and encouragement of number of individuals and entities. Amongst these must be included the most generous contribution of an Anonymous donor who has not only supported the above work, but for a second consecutive year supported the Centre's vocational and career services. Recently completed research on the Centre's participant files by Program Manager, Dr. Curtis Stoelting, clearly demonstrates the critical value of employment-related services through the Centre. In addition to providing short-term social and financial benefit to the Centre's participants who have as one of their primary rehabilitation goals their return to productive engagement, Dr. Stoelting's research demonstrated that upon follow-up months to years after discharge from BIRC, without exception only those individuals who were involved in productive activity at the time of discharge were employed at follow-up. In other words, no individuals who were not

employed at discharge were employed at follow-up. This finding makes it unambiguously clear that a critical component of successful rehabilitation must be employment and career-related services. Again, a sincere and profound thanks is extended to the Anonymous donor over the last two years who has recognized the potential of this critical component of our services. Our struggle now becomes finding a long-term purchaser or funder that recognizes this same benefit.

We would also like to thank all of our many donors and supporters whose contributions both financially and in-kind have made our work possible and in many cases easier than it would otherwise have been. These donors and supporters are identified by name elsewhere in this report.

Finally, we must also extend deepest appreciation to our many wonderful and dedicated volunteers who assisted with the many aspects of organization's operations during the past year. We simply could not do what we do without you! You make a difference in so many ways and we applaud your concern and your many talents that you give so freely to help enrich the lives of others!

Respectfully submitted,

Gerrit Groeneweg
Executive Director

The Brain Injury Rehabilitation Centre's (BIRC) mission is to assist participants to attain improved levels of cognitive, physical, emotional and social functioning; to assist participants to achieve greater personal independence; and to assist participants to re-enter the community's mainstream, including a return to work.

To determine whether BIRC is meeting its goals we evaluate efficiency, effectiveness and satisfaction. The primary efficiency indicators are length of time waiting for assessment and the length of time in treatment. The primary effectiveness indicators are the self-rating on the participant skills questionnaire and employment rate. The primary satisfaction indicator is the post treatment self-report.

Program Participants

Of the 31 participants who started treatment in 2002, 29% were female and 71% were male. The average age at the time of treatment was 40 years. The youngest person was 19 years of age and the oldest person was 67 years of age.

One measure of the seriousness of the injury is the length of hospital stay. For those that stayed in hospital, the average stay was 32 days. The shortest hospital stay was one day and the longest hospital stay was 109 days.

Graph One shows the causes of brain injury for the participants who started their program in 2002. Motor vehicle incidents continue to be the largest single contributor of brain trauma. The other trauma categories include self-inflicted injury, falls, assaults and sports injuries. The acquired category includes aneurysm and tumour. These percentages are similar to the percentages seen in 2001.

Admission and Discharge

This year 31 participants started treatment at BIRC. Calgary Health Region (CHR) funded 16 of this year's

participants who started the program. Last year 22 participants started treatment. It should be remembered that there are always additional program participants in the program in addition to the ones who start in any given year. The significant increase in new participants was due to case managers' ability to carry more participants and our recent focus on targeting interventions to needs and goals as opposed to disability.

This year 28 participants were discharged from BIRC. This is an increase in discharges from last year. The increase is due to our ability to focus treatment on goals rather than disability. The typical goals that people have include, return to work, improving budgeting, learning to take public transit, improving memory, and coping with losses.

Efficiency

On average there were 20 people on the wait list each month last year.

In terms of the wait time for assessment, Graph Two shows that in 2002 the average length of time from initial intake to assessment was 133 days (almost 4.4 months). In 2001 the average length of time from initial intake to assessment was 203 days (about seven months). We have been successful in reducing the average waiting time for participants to get the rehabilitation they need.

Graph Three shows the difference between the amount of time publicly funded participants waited for assessment in comparison to those funded privately in 2002. This comparison shows that in 2002 publicly funded participants took 177 days (about six months) to enter the program and privately funded participants took 99 days (about three months) to enter the program. Even when separating publicly funded and privately funded participants their wait times were still less than in 2001.

In 2002 the average length of time from starting treatment to discharge was

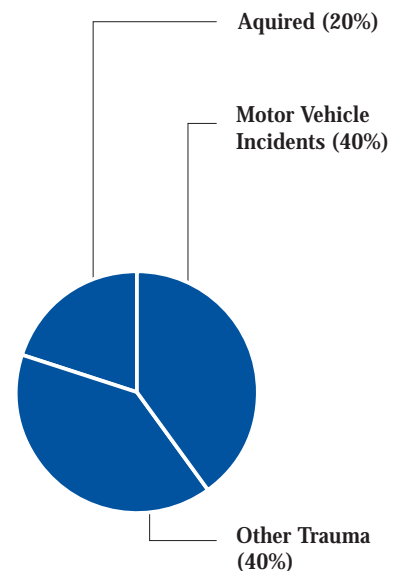
294 days (about ten months). In 2001 the average length of time from starting treatment to discharge was 518 days (almost 18 months). Overall, participants spent less time in rehabilitation in 2002 but still maintained satisfactory outcomes as described later on.

If we separate out the publicly funded participants from the privately funded we see that in 2002 publicly funded participants took 315 days (about 10.5 months) to complete their program and privately funded participants took 255 days (about 8.5 months). The shorter length of stay for privately funded participants is because they focused on a return to work.

Effectiveness

One measure of the effectiveness of the program is a comparison of self-ratings of skills before and after the program. To measure improvement in skills we used a questionnaire that was developed by Dr. Prigatano that is used extensively in brain injury rehabilitation. The

GRAPH ONE
Causes of Brain Injury for 2002



questionnaire covers 30 different skills, in the areas of home management, self-care, thinking skills, interpersonal skills and emotional skills.

This year, overall ratings were at 68% before rehabilitation and at 79% after rehabilitation. This showed an average increase of 11% in practical skills after rehabilitation. Statistical analysis of this difference showed that this was a significant improvement. Interestingly the participants who received more rehabilitation improved their skills more than those who received less rehabilitation.

Another measure of effectiveness of the program is the job placement rate of participants. In 2002 there were 12 participants who were placed on jobs. Of those participants, eight were working at the end of the fiscal year and seven of those were employed full-time. By the end of the 2002 fiscal year employed participants earned a total of \$42,742.92.

This placement rate is much better than in previous years. The improvement is due to a change that was made in our

vocational rehabilitation model that was based on research that was conducted during the summer of 2002. We found that if participants did not obtain employment by the time of program completion they were unlikely to have employment at follow-up. We therefore encouraged participants to go directly into employment rather than entering into a volunteer work trial first. This strategy led to better placement rates. Of course the efforts of our staff members and our vocational rehabilitation counsellors in particular have not gone unnoticed.

Satisfaction

We measure participant satisfaction at the end of their rehabilitation with a questionnaire. The questionnaire asked program completers such questions as, if need be would they return to BIRC for rehabilitation, would they refer a family member or friend and how overall satisfied they were with their rehabilitation. In 2002, on average, respondents were very satisfied with their rehabilitation at BIRC and would refer

others to BIRC. This outcome is similar to the outcome found in 2001.

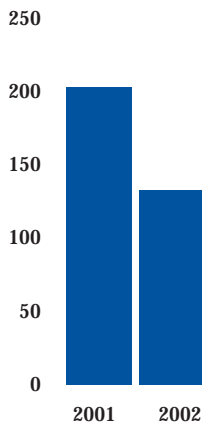
Future Directions

Last year there was a concern about delivery of efficient and effective services to people who have acquired a brain injury. This year we have been able to decrease the wait time for help and decrease the time required for rehabilitation while still maintaining effectiveness and satisfaction. This coming year we need to not only maintain our ability to provide timely and effective services with our current referral base but to expand that base to include brain injury survivors in the workers' compensation system. We will also be challenged to provide services to a broader population base since the Calgary Health Region has expanded.

Curtis Stoelting, Ph.D., C.Psych.
Program Manager

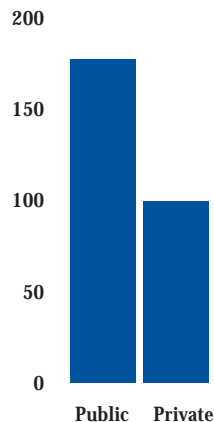
GRAPH TWO

Initial Intake to Assessment Waiting Time (days)



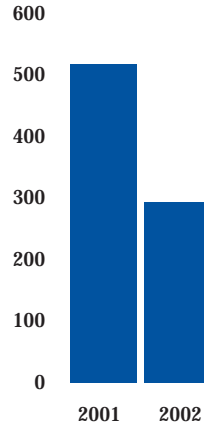
GRAPH THREE

Assessment Waiting Time for Publicly and Privately Funded Participants (days)



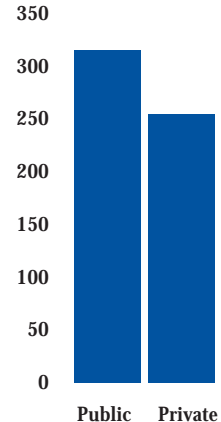
GRAPH FOUR

Average Length of Time of Treatment (days)



GRAPH FIVE

Average Length of Time of Treatment (days)



The Brain Injury Rehabilitation Centre's many volunteers play an integral part in the successful rehabilitation of each and every participant. Over the past fiscal year (April 1, 2002 to March 31, 2003) 56 volunteers contributed over 3,006 hours of service to the Centre in all aspects of the program's operations, including one-to-one support in cognitive and educational rehabilitation, leisure activities and administrative support. This was in addition to the more than 455 hours of support which the Board of Directors and its various committees gave to the organization. There is no question that without the ongoing commitment of all our volunteers, the Centre would not accomplish what it has.

To all our volunteers, the staff and participants of the Brain Injury Rehabilitation Centre say a huge heartfelt "THANK YOU".

Also deserving a very special thank you are the 2002 - 2003 Volunteers who gave so generously of their time to assist us in our casino fundraiser. Some have just come on board but many of the

Volunteers listed have helped us throughout the many years that we have had these fundraisers. They never seem waiver in their support and are ready and willing to help out whenever needed. Special thanks go to: Gary and Marlene Bigg, Bob and Suzanne Campbell, David and Ingrid Campbell, Alies Carruthers, John Churchill, Cliff and Joanne Demetrick, Alvin Effa, Gabriella Groeneweg, Gerrit Groeneweg, Jonathan Groeneweg, Carmen Hanssen, Rose Hanssen, Lorn Howes, Alan Kerr, Ralph Krueger, Rae McKenzie, Bob and Marie Michie, Connie and Joe Ostermann, Sharon Penner, Susan Petch, Elizabeth Stewart, Curtis Stoelting, Beatrice To, Carol and Terence Treleaven, Sheila Trew and Gordon Young.

In addition to the foregoing, we would also like to express our thanks to the many students from Mount Royal College and the University of Calgary who, in the process of completing a variety of course and study requirements, provided hundreds of hours of knowledge and support to the Centre.

Service Volunteers

April 1st 2002- March 31st 2003

1-74 Hours

Luz Alvizurez
Nicole Babush
Nina Barile
Shannon Blackmore
Jane Bouz
Priscilla Che
Yvonne Chen
Anneta Chevchenko
Kelly Chu
Jennifer Corbiell
Anita Fofie
Desiree Fofie
Mitchell Fortney
Stephanie Foster
Karen Green
Claire Hart
Sara Harting
Mihoko Hisatomi
Jennifer Kelly
Crista Kirk
Olga Konwisorz
Rosalyn Korol
Karl Langer
Lori Ly
Sonya Malhotra
June McGonigle
Irene McKay
Lois McNeil
Erin Miller
Ilee Moore
Nathaniel Nielsen
Olubusayo
Ogunfowora
Stacey Pahl
Janet Post
Caitlin Quarrington
Andrea Sargent
Hye-Young Shin
John Smyth
Emily Tripp
Jennifer Twiss
Christy Underwood
Sarah Veenhoven
Giselle Wong

75 - 149 Hours

Peter Chrapchynski
Timothy Collins
April Ditchfield
Jennifer Finley
Lorn Howes
Susan Petch
Patricia Robbins
Regan Taylor
Beatrice To

More than 150 Hours

Brent Kuzmiski
Erin Leblanc
Susan Rogerson
Margo Wong

Our Business Partners

Our participants come from a wide array of occupational backgrounds. By hiring a participant from the Brain Injury Rehabilitation Centre, our business partners assist our participants in adapting successfully back into the workplace and helping them in their goal in achieving greater personal independence. The following businesses have played a vital role in the lives of brain injury survivors:

A.S. Millwork
 B&Q Construction
 Canadian Blood Services
 Famous Players Inc.
 Lifemark Health
 McDonald's Restaurants
 McKenzie Meadows Golf Course
 Multiwood
 "Oh Canada Eh?"
 Quizno's Classic Subs
 The Real Canadian Superstore
 Rocky Glen Kennels
 Shaganappi Point Golf Course
 Spiral Spindles and Turnings

Corporate Donors

AON Reed Stenhouse
 Canadian Natural Resources Limited
 DWC Oil and Gas Services
 Education Law Infosource Ltd.
 EnCana Corporation
 Gary Bigg Professional Corp.
 Hoffman-Dorchik
 Labatt Breweries Charitable Donations Committee
 Macon Resources Ltd.
 Murphy Oil Company Ltd.
 Nexen Inc.
 TELUS
 United Way of Calgary's
 Donor Choice Program

Corporate In-Kind Supporters

A&B Sound
 AMJ Campbell Van Lines, Inc.
 Bagelino's

Calaway Park
 Calgary Co-operative Association Limited
 Calgary Flames Hockey Club
 Calgary Hitmen Hockey Club
 Calgary Stampede
 Calgary Tower
 Calgary Zoo
 Canadian Pacific Railway
 First Calgary Savings
 The Flying Emu
 Greyhound Canada
 Heritage Park
 Humpty's Restaurants International Inc.
 Kensington Gourmet Deli
 Max Pasley Enterprises Ltd.
 (McDonald's Restaurants)
 McKay Pontiac
 Pepperfields
 Purdy's Chocolates
 Sorrenti's Catering
 Stampeder Football Club
 Supreme Basics
 Theatre Calgary
 Toole Peet & Co. Limited
 Vogel & Company
 Yuk Yuk's Comedy Club
 Xerox Canada

Individual Donors

Mrs. Effie Bigg
 Walter & Kaye Brock
 Mr. Robert Campbell
 Mrs. Carmen Hanssen
 Daryl & Douglas Hebert
 Jim & Terry MacLeod
 Mr. Kenneth Penner
 Ms. Sharon Penner
 Ms Deborah Scott
 Mrs. Marg Southern
 Ms Rose Marie Wrobel

Inter-Agency Brain Injury Awareness Event

On March 1, 2003 an Inter-Agency Brain Injury Awareness Event was held in support of four agencies: Association for the Rehabilitation of the Brain Injured (ARBI), Brain Injury Rehabilitation Centre (BIRC), Southern Alberta Brain Injury

Society (SABIS), and Universal Rehabilitation Service Agency (URSA). This fundraiser was held in conjunction with Theatre Calgary's production of "Evita".

On behalf of the Board of Directors, staff, volunteers and participants, we extend our gratitude and heartfelt thanks to everyone who attended our joint fundraiser, and a very special thank you to the following donors and supporters:

Donors

Banff Caribou Properties
 Bernard Callebaut Chocolaterie Ltd.
 Calgary Herald
 Canadian Pacific Railway
 Hoffman Dorchik
 Melissa's Restaurant Bar & Patio (Banff)
 Mrs. Marg Southern
 Pengrowth Management Limited
 Theatre Calgary
 The Calgary Flames
 The Driving Force
 Toole Peet and Co. Limited

Sponsors

AON Reed Stenhouse Inc.
 Gary Bigg Professional Corp.
 Cavabien Hair Studio & Day Spa
 Crowfoot Dodge
 Enbridge Inc.
 Hutchinson Architect
 Kemp Consulting Ltd.
 Lifetime Financial Planning
 Petro-Canada
 Edward S. Pipella, Q.C.
 Sister's Spring Roll and Samosa Limited
 Tesla Exploration Ltd.
 Virginia M. May Professional Corp.
 Vogel & Company.

Individual Supporters

Denis Cooney
 Bruce Gordon
 Doug Hauser
 Dale McCue

**STATEMENT OF OPERATIONS
AND CHANGES IN NET ASSETS**

For the year ended March 31,	2003	2002
REVENUE		
Contract ^ Calgary Health Region	\$ 525,792	\$ 510,476
Grant ^ Alberta Community Development	41,238	-
Donations and fund raising	90,274	139,903
Wage subsidy	2,772	2,370
Interest, memberships and other	1,944	165
	662,020	652,914
EXPENDITURE		
Salaries, fees and benefits	457,180	486,919
Consulting	18,004	27,085
Participant costs	10,121	10,040
Shared library / website development	41,238	-
Rent	111,842	99,556
Maintenance supplies and repairs	240	340
Insurance	3,571	4,627
Office	10,807	11,618
Telephone	3,921	3,963
Staff recruitment	664	2,592
Staff expense and travel	1,180	1,220
Professional fees	4,280	3,000
Library and subscription	766	4,526
Publicity and publications	4,910	-
Professional development and conference	4,142	6,946
Volunteer recognition	960	556
Capital acquisitions	-	1,284
	673,826	664,272
EXCESS (DEFICIENCY) OF REVENUE OVER EXPENSE FOR THE YEAR		(11,806)
(11,358)		
Net Assets (Deficit) Beginning of Year	(24,677)	(13,319)
NET ASSETS (DEFICIT) END OF YEAR	\$ (36,483)	\$ (24,677)

The foregoing statement is excerpted from comprehensive financial statements audited by McKinnon & Company Chartered Accountants. Copies of the complete financial statements are available from the Head Injured Relearning Society located at 300, 815 Eighth Avenue SW, Calgary, Alberta T2P 3P2. Telephone (403) 297-0100.



HEAD
INJURED
RELEARNING
SOCIETY

Head Injured Relearning Society
300, 815 Eighth Avenue SW
Calgary Alberta Canada T2P 3P2

Telephone (403) 297-0100
Facsimile (403) 234-8860

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