

BRAIN INJURY COMMUNITY RE-ENTRY (NIAGARA) INC.



**ANNUAL REPORT
2008-2009**



ANNUAL REPORTS

2008-2009

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INTRODUCTION TO BICR

2008-2009

Brain Injury Community Re-entry (Niagara) Inc. (BICR) is a non-profit organization that provides support services and rehabilitation to individuals living with the effects of an acquired brain injury. Based in St. Catharines, BICR serves the needs of adults throughout the Niagara Region.

Our organization was founded in 1988 by a group of concerned parents and professionals who felt that specialized services were needed in the region. A volunteer Board of Directors consists of an organization founder, rehabilitation professionals and other community partners, which oversees our programs. Funding is provided by a variety of sources including the Hamilton Niagara Haldimand Brant Local Health Integration Network (HNHB LHIN) and the Ontario Ministry of Health and Long Term Care, third party payers, fundraising and private donations.

MISSION STATEMENT

Brain Injury Community Re-entry will provide support and leadership to individuals, their families and/or caregivers within the Niagara Region living with the effects of an acquired brain injury. We promote self-direction, facilitate opportunities for meaningful adaptation, and contribute to the development of the agency and its people. We participate in advancements in the field of rehabilitation, and participate in partnerships that foster ongoing dialogue with the individual and their support network.

VISION STATEMENT

To lead in the field of acquired brain injury rehabilitation, providing advocacy for successful re-entry into the community.

STATEMENT OF PHILOSOPHY

The provision of support services is based on the following beliefs:

- Each individual is a unique adult and is deserving of respect and dignity.
- Support should be flexible, individualized and reflective of choices, abilities and existing support networks.
- Choice often involves some elements of risk. Where possible, individuals will be permitted to experience the result of their choices to the extent that they are able.
- Independence is a dynamic process of accessing people and services as challenges and successes change.

We rigorously promote the rights of the individual and promote recognition of acquired brain injury and how it affects individuals and families through ongoing advocacy and public education.

PRESIDENT'S ANNUAL REPORT
2008-2009

Welcome to our 21st Annual General Meeting. During the 2008-2009 fiscal year we had a full slate of ten directors and no changes during this time frame.

This was a busy year for managers and staff at Brain Injury Community Re-entry (Niagara) Inc. (BICR) as preparations for our Accreditation Canada Survey (previously CCHSA) were in progress. The format changed somewhat from previous years, creating more work for staff but apparently is very rewarding. It is of great importance for BICR to be recognized with accreditation and enables the agency to operate efficiently, maintaining high standards and supports to our participants. By the time this report is out we hope to have had a successful Accreditation Canada report.

I had the pleasure to speak to volunteers during Volunteer Appreciation Week this April. To the volunteers involved in assisting BICR and the Board of Directors a big **"thank you!"** I greatly appreciate your dedication and the enthusiasm and support that you bring to this agency.

I am pleased to report as our participants get older BICR is involved with Long Term Care Facilities to continue support and assure individual's that we are still there for them.

A winter trip to Geneva Park, Orillia, was organized during this reporting period and from all reports it was very well received. Participants from our Residential Services and Community Outreach Support Services who are interested have a winter and summer break at Geneva Park.

This has been a good year for BICR. The Board has been very helpful in the operation of the agency and as president I thank the Board and staff again for the continuous efforts to keep BICR operating smoothly.

Have a safe and healthy summer 2009 and God Bless all.

NICK OSTRYHON
PRESIDENT

**RAPPORT DU PRÉSIDENT
2008-2009**

Bienvenue à notre 21^e assemblée générale annuelle. Au cours de l'exercice 2008-2009, nous avons une équipe complète de dix administrateurs et il n'y a eu aucun changement au cours de cette période.

Ce fut une année occupée pour les gestionnaires et le personnel au centre Réintégration communautaire des personnes ayant une lésion cérébrale (Niagara) Inc. (BICR), les préparatifs étant en cours en vue de notre participation au processus d'agrément d'Agrément Canada (anciennement CCASS). Le format est légèrement différent de celui des années précédentes, ce qui crée plus de travail pour le personnel mais est apparemment un processus fort enrichissant. Il est très important pour BICR d'être reconnu en obtenant l'agrément. Par ailleurs, l'agrément aide l'organisme à fonctionner de façon efficace, à maintenir des normes élevées de qualité et à soutenir nos participants. Lorsque ce rapport annuel aura été rendu public, nous espérons que nous aurons reçu un rapport positif d'Agrément Canada.

J'ai eu le plaisir de parler à des bénévoles au cours de la Semaine d'appréciation des bénévoles en avril dernier. Un **gros merci** aux bénévoles qui se dévouent pour le conseil d'administration et BICR. J'apprécie énormément votre dévouement et votre enthousiasme ainsi que le soutien que vous accordez à l'organisme. J'ai le plaisir de vous signaler que BICR collabore avec les établissements de soins de longue durée afin de continuer à soutenir nos participants vieillissants et leur faire comprendre que nous sommes encore là pour les aider.

Un voyage d'hiver à Geneva Park, à Orillia, a été organisé au cours du dernier exercice qui, selon tous les rapports, a connu un succès retentissant. Les participants des Programmes en établissement et des Services offerts à domicile ont l'occasion de faire un voyage d'été et d'hiver à Geneva Park.

La dernière année a été bonne pour BICR. Le conseil d'administration a fait une contribution très utile au fonctionnement de l'organisme, et en tant que président, j'aimerais remercier les membres du conseil et le personnel des efforts soutenus qu'ils entreprennent pour que BICR puisse continuer à offrir ses services de façon harmonieuse.

Je vous souhaite de passer l'été 2009 en santé et en sécurité. Que Dieu vous bénisse!

**NICK OSTRYHON
PRÉSIDENT**

BRAIN INJURY COMMUNITY RE-ENTRY (NIAGARA) INC.
EXECUTIVE DIRECTOR'S ANNUAL REPORT
2008-2009

I am writing this report on a very cloudy, rainy, April day, and hope that the remainder of spring and summer will be much brighter. During this year (a year of Accreditation Canada), staff, management and the Board of Directors have been very busy. I am personally looking forward to our site visit from the surveyors of Accreditation Canada, as this allows a comparison to other organizations in the province of Ontario.

Brain Injury Community Re-entry (Niagara) Inc. (BICR) received high marks from our participants, families and staff in surveys performed this year. The positive results provide great encouragement and reinforce that the plan of action we have chosen is successful to this point. I would like to take this opportunity to congratulate the 5, 10 and 15 year employees who are receiving service awards this year – well done!

During the past year the organization has participated in a research project with Brock University and the University of Buffalo. The results will help BICR and our participants in the future. It is exciting to recognize that our organization is part of these activities and is an active partner in cutting edge research. BICR continues to work in conjunction with many community partners and is very active in LHIN 4 planning. The organization continues to work with third party contractors that allow additional funds to help participants on our waitlist, or with complex issues.

BICR's Board of Directors, staff and management team work diligently with fundraising activities that include the golf tournament, bowl-a-thon and bingo. This year these funds have allowed the organization to purchase a new van that will increase opportunities for our participants.

The Board of Directors and I continue to pursue a property to permit the building of a new residence to replace the home at St. Lawrence Street, in Welland. BICR has been close on several sites however in the next few months we hope to have a permanent site established.

This has been an exceptional year at BICR with many exciting initiatives and projects completed. I take pride in the work that has been accomplished and thank the Board of Directors, management team and especially the front line staff for their dedication and continued support to our participants. Our services continue to be evaluated as superior by our participants and families; this is a testament to the great leadership of our managers and the front line staff who are diligent professionals. I wish everyone a healthy and prosperous year.

FRANK GRECO
EXECUTIVE DIRECTOR

RAPPORT ANNUEL
RAPPORT DU DIRECTEUR GÉNÉRAL
2008-2009

Je vous écris ce rapport un jour sombre et pluvieux d'avril et j'espère bien que le reste du printemps et l'été seront bien plus ensoleillés. Au cours de l'exercice (une année d'agrément pour nous), le personnel, la direction et le conseil d'administration ont été très occupés. J'attends avec impatience l'arrivée des visiteurs d'Agrément Canada parce que le processus d'agrément permet de nous comparer à d'autres organismes de la province.

Des sondages menés l'an dernier ont révélé que les participants, les familles et le personnel du centre Réintégration communautaire des personnes ayant une lésion cérébrale (Niagara) étaient très satisfaits de nos services. Ces résultats positifs sont très encourageants et illustrent le fait que le plan d'action que nous nous sommes donnés a été jusqu'à présent porteur de succès. J'aimerais profiter de l'occasion pour féliciter les employés qui vont être honorés pour leurs 5, 10 et 15 années de service. Beau travail!

Au cours du dernier exercice, le centre a participé à un projet de recherche avec l'Université Brock et l'Université de Buffalo. Les résultats seront utiles pour BICR et nos participants. Il est exhilarant de reconnaître que notre centre participe à ce genre d'activité et est un partenaire actif dans la recherche de pointe. BICR continue de travailler en collaboration avec ses partenaires communautaires et s'emploie activement à participer à la planification avec le RLISS 4. Nous continuerons à travailler avec des tiers afin d'obtenir des fonds pour aider les participants ayant des problèmes complexes ou dont le nom figure sur notre liste d'attente.

Le conseil d'administration de BICR, le personnel et l'équipe de la direction travaillent avec diligence à des activités de financement, notamment le tournoi de golf, le quillothon et le bingo. Cette année, les fonds recueillis grâce à ces activités nous ont permis d'acheter une nouvelle fourgonnette qui augmentera les possibilités pour nos participants.

Le conseil d'administration et moi continuerons à chercher un terrain en vue d'y construire une nouvelle résidence qui remplacera celle de la rue St. Lawrence, à Welland. BICR a plusieurs fois presque réussi à dénicher un terrain et nous espérons qu'au cours des prochains mois nous aurons trouvé un site permanent. Ce fut une année exceptionnelle pour le centre Réintégration communautaire des personnes ayant une lésion cérébrale (Niagara), de nombreuses initiatives et projets ayant été menés à terme. Je suis fier du travail qui a été accompli et remercie le conseil d'administration, l'équipe de la direction et, surtout, le personnel de première ligne de leur dévouement et du soutien continu qu'ils accordent à nos participants. Nos services continuent d'être jugés supérieurs par nos participants et leur famille; cela témoigne du leadership remarquable démontré par nos gestionnaires et notre personnel de première ligne, tous des professionnels dévoués. Je vous souhaite à tous et à toutes une année remplie de santé et de prospérité.

FRANK GRECO
DIRECTEUR GÉNÉRAL

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Another year has passed and what a year it's been! Local Health Integration Network (LHIN) sponsored community-planning meetings, community-networking meetings, changes to the accreditation process and agency wide initiatives provided much opportunity for progress. While accounting systems and reporting to the LHIN and Ministry of Health, took a bit of a new twist during the year.

During the summer months, LHIN 4 continued to hold community-planning meetings as part of the Ontario Healthcare transformation. The writer attended an Open Space to address the issue of Transportation. (Transportation is one of the top three health system challenges for residents in the Hamilton Niagara Haldimand Brant LHIN.) Several groups were mobilized to review things such as cross border coordination, the cost of transportation and centralized dispatch. Having done much work in this area in the past, we expect that this issue will continue to move forward as part of the aging at home strategy.

In addition, the writer continued meeting with the LHIN 4 Community Support Services Network (formed to liaison between the LHIN and other funded community groups.). During the 2008/2009 fiscal period, this group organized two workshops to continue to provide updates from the LHIN. In addition, the writer was the lead in developing a web site to further facilitate communication between community groups and the LHIN.

Changes to the Accreditation Canada (AC) process created an abundance of activity over the past six months. The need to rollout several surveys to staff required a coordinated approach by managers. Once results were available, the Management Team started completing standards and Quality Performance Roadmaps (QPR's) using current practices and survey feedback from a Red, Yellow and Green flag scale. Of the 111 flags identified from survey feedback, 71 were red, 23 were yellow and 17 were green. Although we did not need to respond to the green flags, we were required to respond to the red and yellow flags. In some instances, this meant providing information with regards to existing systems, while in others it meant reviewing and improving processes. If improvement was identified, we included changes made along with any follow-up data showing progression in the QPR's. With the Accreditation Canada scheduled to review our processes in May 2009, the outcome is yet to be determined.

Departmentally, as part of the Ontario Ministry of Health's transformation, we have responded by changing our chart of accounts & account groupings, software application and reporting methods. During May 2008, the entire accounting office attended Microsoft Dynamics training to become familiar with the new accounting software application. On November 1, we went live with Dynamics with barely a hiccup. Thereafter, the accounting office continued to work with the system.

Moving forward over the next 12 months, we will be facing new challenges that will provide many opportunities for creativity and growth. Many thanks are extended to Sue Keus and Jamie Bird for their ongoing commitment, the functions that they perform everyday and their deep desire to support and improve the department's role in serving this agency.

SANDRA HARDING, CGA
DIRECTOR OF FINANCE

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HUMAN RESOURCES DEPARTMENT ANNUAL REPORT
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The Human Resources department's operating philosophy is based on fostering consistent, fair and equitable employee relations, which supports the overall agency strategy. Our primary focus is to position BICR as the agency of choice for our participants, employees, students and volunteers.

THE NEW HUMAN RESOURCES TEAM:

- Jacqueline Buchanan returned in January 2009 from her maternity leave.
- Erica LaPlante accepted a six (6) month contract - replaced Colleen McIntosh (Jacqueline's contract). Erica's contract was later extended for an additional three (3) months to assist in Human Resources projects.
- The Education and Volunteer Coordinator positions has been intertwined with the HR coordinator's role. Both Jacqueline and Erica have enriched their position by incorporating volunteer and education responsibilities.
- I began my role as the Director, Human Resources effective June 16, 2009.

Not only have some of the responsibilities and duties shifted, coupled with two new faces, the location of the Human Resources office changed. We moved to the East wing of the main office, where the Human Resources Coordinators share one office, which is adjoining to the Director, HR.

We continue to be committed to our health and safety initiatives. The Joint Health and Safety committee along with the HR team reviewed, revised and added additional policies to meet the changes within the Ministry of Labour, and the Occupational Health and Safety Act. In addition, completed the Terms of Reference and have applied for a multi-site structure for the JH&S committee. The team worked diligently in completing all policy reviews. As well, BICR was part of a Ministry of Labour audit. We were very successful with only one small recommendation.

The Human Resources Coordinator reviewed and where necessary revised over 75 policies to ensure BICR's philosophies, policies and procedures met legislation along with supporting our culture and climate. As part of completing this project, all the policy changes were rolled out by using different communication methods.

The Human Resources team took on a major training project at the end of Q4 by creating a new policy regarding Workplace Violence Prevention. By using the resources gathered from an internal needs assessment along with internal and external materials and resources, the team created a training module. This mandatory training focused on Workplace Violence Prevention and Harassment and Discrimination Prevention. The training was successfully rolled out to all 126 employees within the month of March.

The Human Resources team completed a 3 year plan to coincide with BICR's strategic plan. Our team continues to work with the Management team to implement new ideas to assist in the recruitment process for entry level positions. We continue to enhance our community partnership to assist in marketing BICR as an employer of choice for volunteers, students and potential employees.

BICR continues to support environmental issues. This year we removed all water and juice bottles which we used for meetings and training. In its place, we introduced pitchers and jugs. We continue to encourage all to

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use glasses or compostable plastic cups. Once again the Wellness committee moves forward to continue to be an innovative and forward thinking committee. Congratulations again on their hard work in 2008 as they brought home the "GOLD HEALTHY LIVING AWARD".

Providing avenues for employee feedback is an on-going feature. 'Food for Thought' lunches are held monthly, where invited employees meet with senior management to talk about their work at the Agency. It's a great opportunity for different departments and employees to share information and get to know each other. Identified as our strengths in the luncheons are flexibility, training, work life balance and autonomy. Another regular feedback mechanism is exit interviews which analyze both our strengths and areas of opportunities. At year end, Human Resources analyze all data and provides a summary to the Management team and all employees through the Internal Digest.

Though Human Resources has gone through some changes for 2008-2009, the year has been very productive. With the support from the Senior Management team, the Management team and all employees, the new Human Resources department will have a successful 2009-2010.

Overall the mission of the Human Resources department is to continually work towards innovative solutions that attract, engage, develop and support employees, students and volunteers. By fostering open communication within the internal and external environments, a positive team atmosphere will contribute to achieving and exceeding the agency's overall mission.

Thank you to Jacqueline Buchanan and Erica LaPlante for working collectively in bringing our team together and illustrating another successful year.

GINA AIELLO
DIRECTOR, HUMAN RESOURCES

HUMAN RESOURCES COORDINATOR ANNUAL REPORT 2008-2009

This past fiscal year has been a year of significant change for the HR department. Not only did the department move offices within 261 Martindale but the members of the department changed as well. Colleen McIntosh left in June to pursue other interests leaving Erica LaPlante to assume the duties of HR Coordinator until I returned from maternity / parental leave in January 2009. In addition, a new Director of HR was hired – Gina Aiello. Amidst all the internal HR change, there was also a great deal of movement within the rest of the agency, as illustrated in the chart below.

CATEGORY	NUMBER OF CHANGES
New Hires	38
Resignation / Termination	35
Internal Status Changes	43 (14 being Relief – Part –Time)

Of notable importance too, BICR won the 2009 Gold Living Award from the Region of Niagara for Wellness in the Workplace Initiatives – totaling four years in a row! Achieving gold status success so consistently is undoubtedly a testament to how much the agency's culture embraces the commitment to maintain a healthy and well-balanced workplace for all BICR employees.

NEW HIRES

During the past year, BICR reverted back to the four Program Manager model. This resulted in the successful recruitment of an additional Program Manager, who assumed the ever growing and consistently demanding responsibilities for the Richardson Court and Parkdale residences. In keeping with the pattern of previous years, the number of new hires remained relatively stable at twenty-eight (28) throughout the year, of which twenty-four (24) were Rehabilitation Counsellors. BICR also was able to take part in the Canada Summer Student Jobs Program sponsored through the HRDC, which allowed us to place two students within the agency - one was shared between the Recreation and COSS programs and the other was placed in residential services. BICR was able to hire both students upon completion of their summer positions, as permanent relief Rehabilitation Counsellors.

TERMINATIONS

The number of departing employees rose over last year but remained consistent with the long-term trend. Of the thirty-one (31) employees who left BICR, (75%) were Rehabilitation Counsellors, however in a slight variation from previous years, five Case Facilitators left as did two contract employees. The reasons for departure were consistent with previous years: the majority reason cited was for another position (29%) followed by returning to school (16%). Interestingly, the average tenure of departing employees was 2.68 years (the longest being 7.67 years and the shortest was one month).

HIGHLIGHTS FROM THE HR COORDINATOR:

- The BICR Policies & Procedures manual underwent an extensive review. To reflect changes in legislation and in response to internal and external factors affecting our working environment, many updates were incorporated into the policies and a few new policies were comprised and added.
- The average tenure of all employees is 6.07 years. Eight employees celebrated ten years of service and five celebrated five years of service.

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- Continuing partnership with Niagara College and Brock student placement programs, which in turn feeds into our recruitment streams.
- Focus on work-life balance resulted in not only award-winning policies but also a retention strategy that is reflected in employee satisfaction.
- 94% of departing employees would recommend BICR as an employer to family and friends.
- A further analysis of the exit interviews revealed that employees felt their job(s) were interesting and the level of autonomy within their positions was satisfactory.

GOALS FOR THE YEAR AHEAD

- The policy changes and the new policies being implemented will require more training and communication to ensure understanding, adherence and a consistent application, aiding in increased employee accountability.
- Leveraging the global economic environment to our advantage in the area of recruitment.
- Continue to develop, support and implement best practices in recruitment, orientation, performance development, recognition, learning and development.
- Explore cross training opportunities to support the agency's succession plan and strategic initiatives.
- Continue to promote and encourage employees to utilize the full-range of services offered by our Employee and Family Assistance Program in order to maintain a healthy and well balanced workforce.

HIGHLIGHTS FROM THE EDUCATION & VOLUNTEER DEPARTMENT:

- Workplace Violence Prevention Training Initiative: This included the creation of a new policy- Workplace Violence Prevention- and significant revisions to the existing Discrimination / Harassment Policy. Using the information collected from a Risk Assessment conducted prior to this initiative and in response to additions to Ontario legislation, Workplace Violence Prevention training was designed and disseminated to 98% of BICR's employees within a six week period.
- The Employee Orientation Manual was revamped and introduced to new hires, reflecting the changes made to internal BICR policies and procedures in order to provide a more practical and relevant guide to employment at BICR.
- SUBI Workshop: In addition to a variety of BICR staff in attendance, employees of six external community agencies were present at this workshop hosted successfully by BICR to learn more about and discuss the relationship between brain injury and substance abuse.
- The education calendar continued to provide additional learning opportunities including offering a series of in-services on mental health awareness in the workplace.
- In conjunction with the Wellness Committee, Lunch n' Learn sessions were provided at the residential sites to provide information on how to cook healthy meals.
- Partnerships were continued with Niagara College and Brock University for student placement solidifying our reputation in the community and allowing the agency to remain current with what is being taught in the school system.
- Continued relationships with community partners and the Regional Association of Volunteer Administrators (RAVA).
- National Volunteer Week – to acknowledge the positive impact our volunteers have on the agency's participants, BICR hosted an event to recognize their willing dedication and support to the agency, during Nation Volunteer Week in April.

ONGOING GOALS AND OPPORTUNITIES FOR THE EDUCATION & VOLUNTEER DEPARTMENT

- Long – term employees remaining engaged and assuming accountability for completing mandatory annual training.

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- Utilizing alternative modes to deliver mandatory and or non-mandatory in-services i.e. web-based training.
- Identify new training needed to ensure staff skill sets mirror anticipated needs of participants coming into service as well as those whose life-stage is changing while working with us.
- Expand the volunteer program to departments not already utilizing volunteers, such as administration / finance and ensuring volunteers are matched appropriately with participants or other volunteer opportunities.

The Human Resources department has just begun working together. We feel with the resources we have available and the supportive employees, we will have the opportunity to work toward the future goals and objectives which will continue to reinforce BICR as the employer of choice for employees, students, staff and volunteers.

JACQUELINE BUCHANAN
HUMAN RESOURCES COORDINATOR

ERICA LAPLANTE
HUMAN RESOURCES COORDINATOR

Very early in the fiscal year, BICR learned that the Canadian Council on Health Services Accreditation (CCHSA) was changing its name to Accreditation Canada. It was soon learned thereafter that with the name change came significant changes to the accreditation process itself. The new program, called Qmentum, included updated and new standards, a new self-assessment process, the development and monitoring of a Quality Performance Roadmap, a refined survey process with TRACER methodology, additional Required Organizational Practices and new data submission requirements. Throughout the year, many resources were dedicated to preparing for the survey scheduled for May 10 – 13, 2009. In addition to the task of working through the self-assessment process and supporting day-to-day operations, new projects included:

- Development of the Pandemic Plan.
- Creation of an agency-wide Falls Prevention Strategy.
- Refinement of the agency's Ethics framework and policies.
- Creation of the Participant Safety Plan.
- Coordination of the Strategic Information Systems Plan.
- Changes to record management processes, including the introduction of formally reconciling medications with the participant at admission and transfer.
- Formalization of Infection Prevention and Control practices.
- Prospective analysis using the Errors of Omissions framework to address Participant to Participant Violence.
- Participant Safety Steering Committee initiatives including the development of the Health Status Change Severity Assessment Tool and revisions to the agency's Adverse Event definition.

Many thanks are extended to all staff involved in the many initiatives and preparation for the survey. The hard work and dedication of all staff during this time is to be applauded.

During this time, specific Strategic Information Systems initiatives were also addressed:

- BICR finalized the implementation of the new scheduling software *Time Shift*. During this phase, it was necessary to maintain two systems until the agency was able to transition fully to the new software. The success of this process is due to the significant efforts of the Scheduler who ensured that schedules were delivered as usual despite the added tasks each day.
- Roll-out of new computer purchases and new Office 2007 software.
- Conversion of the agency's web site to Adobe Dreamweaver, enabling in-house maintenance of the site. All routine updates and changes are now completed internally.
- BICR assumed responsibility for the creation and maintenance of the web site for the Ontario Association of Community Based Boards for Acquired Brain Injury Services.
- Preliminary planning to add electronic signature technology.

OBJECTIVES FOR THE UPCOMING YEAR:

BICR now has two major emergency preparedness plans developed – the Emergency Response Plan and the Influenza Pandemic Plan. In the next year, the agency will work towards finalizing the linkages between these two plans and sharing the plans with community partners.

PROJECT MANAGER ANNUAL REPORT

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Continue to develop and support Participant Safety Steering Committee initiatives, including:

- Quarterly visits to program staff meetings to communicate changes and updates.
- Implementation of Errors of Omissions – Participant to Participant Violence recommendations.

Assume responsibility for the agency's Documentation training, both at orientation and annual refresher training, and add specific components to hi-light topics such as privacy issues and Incident/Accident reporting.

Strategic Information Systems Planning:

- Roll-out of new computer purchases and second network server;
- Integrate electronic signature technology;
- Plan and scope requirements for the new residence;
- Review destruction of information record management processes;
- Replace colour photocopier.

Many thanks are extended to the Administration team for their continued dedication in supporting participants and staff. I look forward to another exciting year.

HEATHER OLSZEWSKI
PROJECT MANAGER

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RESIDENTIAL SERVICES ANNUAL REPORT
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GENERAL OVERVIEW

This report covers the period from April 1st, 2008 to March 31st, 2009. Residential Services is comprised of the Richardson Court, St. Lawrence and Parkdale Place residential sites inclusive of the Transitional Training Facility.

RESIDENTIAL SERVICES

During this reporting period the Residential department provided resources and supports for 16 full-time residential participant placements. However, during the year the department was able to support 22 individuals through transitions which created vacancies and innovative respite options.

Services for the participants were achieved through the dedicated efforts of a supportive team comprised of 2 Team Coordinators, 5 Case Facilitators, 54 Rehabilitation Counsellors, and 8 students. In January, the residential management team was expanded to include 2 program managers for the residential department.

Our highly skilled staff provided assistance to participants with regards to all aspects of their life including activities of daily living, behavioural management and community integration. As we continue to accommodate an aging population the Residential Program has embraced changes to appropriately meet the needs of our participants. The department has also remained diligent on further fostering supports for transitioning those individuals whose needs are greater than our departments rehabilitation abilities to Long Term Care Facilities where their ongoing health issues and care needs can be met.

Over the course of the year the Residential department was quite active. Transfers from Residential Services to Community Outreach Support Services were completed for three individuals. Of the three, one individual was transitioned into a Long Term Care facility within the Niagara Region and continued to remain connected to the agency through COSS's Long Term Care Case Facilitator. Tragically, during the course of the year this individual passed away in Hospital in December 2008.

There were three transfers into the Residential department. Of the three individuals, two came from Long Term Care Facilities where they had been inappropriately placed. The third individual was living at home with his family.

Through the committed efforts of the staff and a Shared Care arrangement with one of the residential participants the Residential department was able to provide additional respite supports to three individuals. Each of these individuals would typically spend one to two weekends a month at St. Lawrence for their respite stays. A typical respite weekend provided support to the individual from Thursday evening to Sunday afternoon.

During this year the residential team continued to be committed to the agency's strategic direction paying great attention to the area of Participant Safety and creating a Culture of Safety. We wish to extend our gratitude to all the residential staff for their tireless efforts and dedication towards constantly striving to improve the quality of supports to our participants.

CHRISTINE WILLIAMS
PROGRAM MANAGER

JASON YOUNG
PROGRAM MANAGER

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GENERAL OVERVIEW

The Outreach department provides variable services to approximately 100 participants. The Outreach team provides rehabilitation support to individuals with an acquired brain injury based on identified goals that are mutually developed. Generally the focus is on increasing independence and skill development. The hours of support provided varies depending on the needs of the individual. A goal attainment scale is used to assist in measuring any gains made. Therefore our support is goal oriented, individualized and measurable to the extent possible. We also assist with many other issues as they arise thus the focus can often be on maintaining an individual within the community.

PROGRAM INITIATIVES & HIGHLIGHTS

- The department has had some staffing changes over the past year. We have introduced two new Case Facilitators who come from other agencies with employment experience and with substance abuse experience. The team consists of one Team Coordinator, nine Case Facilitators, two full time Rehabilitation Counselors and six part time Rehabilitation Counselors and four relief staff.
- With our Case Facilitator who provides support to younger individuals living in Long Term Care facilities we have successfully transitioned three individuals into our Residential Program. We continue to provide community integration and quality of life activities for approximately 23 individuals who would otherwise be spending their days within a facility of frail elderly people.
- The Outreach Program again facilitated a weekly summer activity program at Lakeside Park in Port Dalhousie. This program takes over from the successful bowling program which ends in May for the summer months.
- BICR partners with NTEC (Niagara Training and Employment Agency) in Port Robinson, to provide a Horticultural Therapy group to a number of interested participants. This is a hard working group who help beautify the grounds of NTEC. COSS and Modular Services coordinated a Christmas Party for participants and family members at St. Columba Church which was well received by all who attended. The fabulous Gary Smith provided the entertainment and was a resounding hit. This year's date has already been set and will include Gary.
- The Outreach staff continues to advocate for their participants and we are grateful for the funds available to assist with one time purchases needed by BICR participants. This funding is made available to our participants from BINGO fundraising and donations made to BICR from former participants.
- All COSS Case Facilitators and full time Rehabilitation Counselors have received the OBIA level one training and several have taken the level 2 training that is offered certain years.
- We continue to promote professional development and several staff attend the annual Hamilton Health Sciences conference each year. Other professional development courses, workshops, inservices are highlighted in our Internal Digest and staff are encouraged to apply and frequently take advantage of the opportunities that are presented.
- Many of the Outreach staff are involved in committees that are important to the quality of our work. We have representation on the Infection Prevention and Control Committee, the Participant Safety Steering Committee, the Behavioral Review Committee, the Social Committee, the Wellness Committee, the Medication Committee and the Joint Health and Safety Committee.

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COMMUNITY OUTREACH SUPPORT SERVICES ANNUAL REPORT
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- The Program Manager sits on the Joint Health and Safety Committee as one of the certified Management representatives, the Wellness Committee and as the Management representative for the Social Committee.
- Members of the Outreach Department have been active in contributing and participating in Accreditation activities throughout the year.

OBJECTIVES AND GOALS

- BICR continues to provide input to various subcommittees related to our LHIN. The COSS Program Manager sits on a committee that is focusing on younger adults living in Long Term Care Facilities. The objective is to identify and provide additional meaningful support to this younger age group if there is a need. This subcommittee is comprised of individuals with attachments to agencies that include various disabilities groups.
- Surveys to various Long Term Care Facilities have gone out and relevant information about numbers and need for additional services is being compiled.
- Through BICR's working relationships with many LTC facilities in the Niagara region, we have identified the possibility of a partnership with one of the facilities where we could provide day activities to individuals with ABI as well as those with other disabilities. The common denominator might be younger ages than the average age of those living in LTC facilities. The partnership would allow BICR to provide the expertise on brain injury and the facility could provide space and staffing to permit the participation of individuals with various health and physical needs.
- We plan to continue to provide support to participants on our wait list and, to date, have been quite successful in keeping the wait list small.
- We plan to continue to implement quality improvement initiatives to ensure that the BICR Outreach Department provides quality services. One way in which we will facilitate this happening is by continuing to review the Accreditation Canada standards regularly and looking for areas to improve our services and methods and practices.

In conclusion, I am proud to be part of this wonderful organization comprised of committed and dedicated professionals. Working together, we are able to provide meaningful, holistic support to individuals and their families living with an acquired brain injury in the Niagara Region.

LINDA RAPLEY
COSS PROGRAM MANAGER

MODULAR SERVICES ANNUAL REPORT

2008-2009

GENERAL OVERVIEW

The Modular Services Manager position has the primary responsibility of overseeing the following services:

- Case Coordination (2 full time Coordinator positions)
- Fee For Service (securing and overseeing 3rd party funded contracts)
- Long Term Case Facilitation (1 Case Facilitator position)
- Recreation Services (1 Coordinator position)
- Transitional Living, Buckley Towers Apartment Program; (1 Coordinator position, 1 Case Facilitator position and 7 part time/relief Rehabilitation Counsellors)
- Vocational Services (1 Coordinator, 1 full time Case Facilitator position)
- Office Secretary (1 full time position)

PROGRAM INITIATIVES AND HIGHLIGHTS

- Shelby Banas settled into her new role as the Team Coordinator at Buckley Towers. There were three participants who transitioned out of the apartment cluster program in the past fiscal year. One of these individuals was able to secure an apartment within the same building, one moved to an apartment still within Niagara Falls and one relocated to another program in Hamilton. This program has continued to focus on the provision of transitional living experiences for our participants. During the past fiscal year there were two new admissions. Some of the challenges that the program has experienced have centered on addictions and a resistance to transitioning out of the program once individuals are comfortable in the building. One of the barriers participants face when transitioning out of the program is the lack of subsidized housing readily available to them. In February 2009 management of the Buckley Towers program was transferred to Christine Williams, Residential Services.
- The PET program transitioned back to the Modular Services Manager from Community Outreach Support Services in February 2009. Additionally, one case facilitator was reassigned to the Modular Services manager as well. The OMOD moved its location in 2008 and the office space design has provided some adjustment and space issues. The program has adapted well and continues to provide programming two days per week in Fort Erie as well as 5 days per week in St. Catharines.
- Case Coordination services and staffing levels remained stable throughout the 2008-2009 fiscal year. This stability led to an increased active number of files that the case coordinators provided service to.
- Fee for Service contracts within the agency continue to be managed by the Modular Services Manager. The role of the modular services manager within these contracts is to prepare initial assessments, complete proposals and secure funding while working collaboratively with the BICR program that the individual will be accessing. Once the individual is in service the modular services manager continues to oversee the file from an administrative standpoint, ensuring that billing is completed, monitoring progress, forwarding reports, updating contracts, etc. During the 2008-2009 fiscal year FFS contracts continued through WSIB, Seriously Injured Worker Program, and various automobile insurers. These contracts have included providing support on an outreach basis, in a hospital setting, the Buckley Towers apartment program, respite and counselling and assessment services through BICR's Clinical Director and Social Worker. Current contracts range from three hours of support a week to 20 hours of direct support a week. Vocational services continue to expand their ability to provide participants with competitive employment and volunteering opportunities. In the summer of 2008, an additional part time rehabilitation counsellor to assist with increased support needed for the Gardening Angels. They are currently exploring a partnership with merchants in the Queen Street revitalization project in Niagara Falls to install and maintain planter boxes.
- Recreational services offered a family boundless adventure trip in the Ottawa Valley and both a summer and a winter vacation to Geneva Park in Orillia. Both of these ventures were a success. A number of participants are starting to inquire about BICR offering a Caribbean vacation opportunity.
- The long term case facilitator continued to provide excellent support to 36 individuals in the past fiscal

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year. This position has allowed participants to manage their lives with minimal support while having access as needed surrounding financial concerns that arise, housing issues and medical appointments. A good portion of this position involves advocating with and on behalf of participants.

- Student placements and a Seed student continued to provide benefits to the Buckley Towers apartment program and Recreation Services.
- BICR's marketing and promotional board was utilized at the Hamilton Health Sciences Corporation ABI conference in May 2008, the Annual General Meeting in June 2008 and the Brain Injury Association of Niagara conference in October 2008. The board has received positive feedback.
- Strength Deployment Inventory (SDI) training was provided to first year Niagara College students in the Social Service Worker program.
- Internal Committee involvement included the Admissions Committee, Accreditation Canada ABI services (Co-Chair with Linda Rapley) and the Golf Committee. Externally, the modular service manager sits on the LHIN ABI Network and is involved in a subcommittee focused on identifying standards for rehabilitation therapists working within the field of ABI.
- Sharon Coulson, Office Secretary has continued to publish BICR's marketing materials and in-house publications such as the Participant and Family Handbook, the Program and Service Guide, etc. In the past year Sharon has also taken an initial course in Dreamweaver (website development and design). Sharon is now very involved in maintaining the information on BICR's website, adding links and updating information.
- The writer had the opportunity to represent BICR at the annual OACCAC tradeshow in June 2008 in conjunction with representatives from Dale Services and PHABIS to profile BICR's not for profit counterparts across Ontario.

OBJECTIVES FOR THE UPCOMING YEAR

- As the agency continues to move towards updated technology, DocuShare will become used with greater frequency and reduce duplication of records. Off site programs such as PET and Buckley towers made significant gains in using DocuShare as their primary Record Binder. Modular service sites continue to eagerly await the introduction of AutoSignature programming that will further our ability to utilize DocuShare to its fullest extent possible.
- Planning and development days will continue to occur with the individual program within Modular Services.
- BICR's services will be profiled at appropriate venues utilizing the new marketing board. Arrangements are underway to attend the conference tradeshow.
- Active participation in preparing for AC site visit in 2009.
- Actively review any call for proposals from the LHIN that will support the aging at home initiatives and review the feasibility of BICR securing additional funding to create additional apartment style living opportunities with supervision and support.
- Each of the Coordinators or Case Facilitator's has completed a summary report of their program's activities and accomplishments. Case Coordination, Long-term Case Facilitation, Recreation and Vocational Services have submitted annual reports on their respective department's activities and accomplishments in the 2007-2008 fiscal year. Please refer to these reports for additional information.

I believe I am privileged to be surrounded by a dedicated staff group within modular services who continually put the mission and vision of BICR into action by remaining focused on BICR's grass roots approach to service delivery. BICR's strength is its ability to respond to the diverse challenges that our participants face and continue to advocate for increased access to the community and an enhanced quality of life.

DARLENE STEVENSON
MODULAR SERVICES MANAGER

BUCKLEY TOWERS ANNUAL REPORT 2008-2009

GENERAL OVERVIEW

Buckley Towers provides a supported living environment for participants who want their own independence, yet still require support, striving to eventually enter the community on their own.

Buckley programs hours of operation are 7 days a week from 8:00 a.m. – 9:30 p.m. so participant program needs are fulfilled. Buckley staff continually model independence and problem solving skills to help the participants on a daily basis to move forward in achieving their goals.

BICR continues to have a thriving partnership with Niagara Housing through the Buckley Towers program. Allowing participants to interact with other residents and become a part of the community.

HIGHLIGHTS FROM 2008 - 2009

- Once again participants were asked to participate in the Project Share Garden. They planted, weeded, watered, and cultivated a garden of fresh vegetables such as tomatoes, beans, broccoli, lettuce, and peppers. All participants were able to access the garden at anytime, so it could be maintained throughout the summer.
- A new program manager was introduced in February 2009.
- Buckley recently received a van in April 2009.
- One of our participant's is in the beginning stages of transitioning out into the community.
- Another participant moved out into the community and receives services from our Community Outreach Support Services (COSS) program.
- Buckley Towers is the host of several recreation events out of Niagara Falls. Buckley Towers staff arrange, and host recreational events on a monthly basis.
- A new participant from the COSS program waitlist moved into Buckley Towers.
- Participants helped out on Earth Day picking up garbage around the grounds of Buckley Towers making their neighbourhood environment a little cleaner.
- Buckley bid a farewell to a couple of staff and welcomed a new staff member to the team.

SHELBY BANAS
TEAM COORDINATOR

BRAIN INJURY COMMUNITY RE-ENTRY (NIAGARA) INC.
CASE CO-ORDINATION ANNUAL REPORT
2008-2009

GENERAL OVERVIEW

The Case Management program is the first service that an applicant receives once deemed eligible via the intake process. It is a time-limited service that provides initial service coordination to individuals on BICR's waitlist. Case Coordinators assess participant needs, assist with goal setting and service planning, help access other resources, advocate, and make referrals for other services.

HIGHLIGHTS FROM 2007-2008

There was staffing stability within the department this year. At the end of the last fiscal year a new case manager was hired. This year there were no changes within the department.

STATISTICS

The following is an outline of current averages within the past year. It combines the numbers from both Case Coordinators currently working within the program.

TOTAL FILES SERVED	CURRENT ACTIVE	FILE CLOSURES/DISCHARGES	TRANSFERS TO OTHER BICR PROGRAMS
65	40	13	12

Closure/Discharges are files that are no longer open at BICR. Files are closed or discharged because support needs have been met or contact has been limited.

Transfers occur between other BICR programs. This past year transfers were made to COSS, Social Work, Buckley Towers Apartment cluster program and Long Term Case Facilitation.

The average number of files per month for each Case Coordinator was 21.

CHALLENGES/TRENDS

Caseloads continue to be diversified with respect to the ages of participants, background and cause of injury. Some examples of injuries are assaults, tumours, aneurysms and strokes. Determining eligibility for service has been an ongoing process and challenge as there have been some files for which it is difficult to determine a clear diagnosis. Substance abuse issues are ongoing with some participants. It can be very challenging to provide service as substance use impacts on the participants ability to follow through with support services and recommendations.

Both Case Managers are active members on agency committees and have contributed to Accreditation Canada working groups. As well, they facilitate full day internal staff training in CIM (Crisis Intervention Management) and assist with recreation groups when staffing is needed. One Case Manager participates in the after hours on call pager system, for one week at a time on a six week rotation.

The Case Management team continues to provide excellent support to participants coming into service. As Case Managers are usually the first person that provides service it is important that rapport and relationships are built so that participants feel comfortable and will be successful.

JONATHAN WILLIAMS
CASE COORDINATOR

JOE TALARICO
CASE COORDINATOR

BRAIN INJURY COMMUNITY RE-ENTRY (NIAGARA) INC.
LONG TERM CASE MANAGEMENT ANNUAL REPORT
2008-2009

GENERAL OVERVIEW

The Long Term Case Facilitator provides support and follow-up to participants who are being gradually discharged from BICR services or who require minimal support on a long-term basis. Hours of support as well as support requirements are participant driven.

STATISTICAL INFORMATION APRIL 2008-MARCH 2009

CASELOAD APRIL 2008	ADMISSIONS	DISCHARGES	TRANSFERS	CASELOAD MARCH 2009	WAITLIST MARCH 2009
36 participants	4	3	1	36	1
	3 COSS 1 Case Management				

The above statistical information provides an overview of the Long-term Case Facilitators caseload from April 2008 to March 2009. This writer started and ended the fiscal year with 36 participants, one participant was awaiting service.

REFERRALS/ADMISSIONS

Four individuals were admitted to the program during the course of the year. Three referrals were processed from the Community Outreach Support Services (COSS) program. One as a result of lack of commitment to identified goals and the other two individuals requested continued support on an as needed basis. One referral came from Case Management Services. This individual exceeded the timeline of Case Management Services but still required intermittent support.

AREAS OF SUPPORT

The writer advocated with the participant regarding their immediate concerns. Writer provided emotional support and assisted with problem solving providing information, education and assistance with linking individuals with both internal services and external services. Writer addressed participant housing concerns. Writer supported participants during medical appointments and assisted with comprehension of correspondence and form completion. The Long-term Case Facilitator worked closely with the participants significant others. In addition, support was provided to participants in crisis situations, a crisis is defined as any significant internal or external environmental change that overwhelms the participant and exceeds their ability to cope (24 crisis's were tracked during the aforementioned fiscal year).

TRANSFERS

One individual was transferred during this fiscal year, as a result of increased support requirements. This individual identified very specific rehabilitation goals, which would be addressed within COSS.

DISCHARGES

Three discharges took place from April 2008 to March 2009. Two of these participants had not accessed support for an extended period of time and agreed that further support was no longer required; the other individual passed away as the result of an existing medical condition.

DONNA RIX
LONG TERM CASE FACILITATOR

BRAIN INJURY COMMUNITY RE-ENTRY (NIAGARA) INC.
PERSONAL EFFECTIVENESS TRAINING ANNUAL REPORT
2008-2009

The number of individuals attending the Personal Effectiveness Training Program (PET) has fluctuated between 41 and 49 participants in the past year. This total participant number includes 12 Ontario March of Dimes participants, between 8 and 11 participants who attend PET in Fort Erie and up to 30 BICR Niagara participants who attend program in St. Catharines. The fluctuation in program participant numbers is due to short term group initiatives offered throughout the year.

Participation in the PET program is based on participant need or interest in the activities offered. The wait time for the program ranges from immediate to six months and is dependent upon the nature of the request, transportation challenges and how the participant adapts to the group setting. Currently there are 5 participants on the wait list. Attendance varies for each person and ranges from a half day to five days per week. The average OMOD participant attends PET 2 days per week while the average BICR participant attends the program 1 ½ - 2 days per week. The average participant attending in Fort Erie attends 1 ½ days per week.

The PET program continues to provide service based on 5 components including: Skill Training, Physical Exercise, Leisure Development, Community Skill Development and Supported Community Placements.

Skill training activities throughout the fiscal year have been offered both individually and within a group setting. Topics have included an on-going social and life skills group, cooking and smart shopping, nutrition and fitness, healthy lifestyles, money management, current events, safety, disability awareness, independent living skills, making preservatives, environmental issues, geography and mathematics skills.

Physical exercise, leisure and community skills development have encompassed a wide variety of activities at the Ontario March of Dimes, Head Injury Association of Fort Erie and in the community. The activities have ranged from indoor and outdoor physical activities, community outings, games, holiday crafts, cardio and weight training, music, jewelry making, baking, Fun in the Sun and gardening.

Each year the PET program hosts craft sales and the proceeds are used to subsidize community outings for participants of the program. This year the PET program expanded their fundraising endeavours to include a Valentines Day Dance in partnership with BICR's Recreation Program. A local band volunteered their time to perform at the dance and the St. Catharines Optimist Club donated their club location where the dance was held. The dance was an overwhelming success with between 35 to 40 participants attending along with their spouses and family members. Participant reviews of this event were positive and the PET and Recreation Department plan to run the dance again next year.

The PET program continued to contract the services of a music therapist to provide services two hours per week. This particular component of the PET program remains open for any BICR participant to access. Currently there are 17 participants involved with this component of the program.

Community Connections continues to be offered on an on-going basis to assist individuals to volunteer in the community in a supported environment. This allows participants the opportunity to provide a service in the community and develop basic work skills. Within the past year, participants have volunteered their time

BRAIN INJURY COMMUNITY RE-ENTRY (NIAGARA) INC.
PERSONAL EFFECTIVENESS TRAINING ANNUAL REPORT
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assisting the following organizations: Community Care of St. Catharines and Thorold, Niagara Action for Animals, The Animal Assistance Society, Ontario March of Dimes, YMCA of Niagara, Niagara Literacy Association of Fort Erie, The Humane Society and the Ontario Early Years Program. Participants are provided opportunities to complete volunteer work projects as a group at the Ontario March of Dimes. Other projects involve participants completing work projects at various community organizations.

BICR continues to provide two full days of service on a weekly basis to Head Injury Association of Fort Erie participants. This enhances access to services for individuals living in Fort Erie, Ridgeway and the Crystal Beach area. This year between 8 and 11 participants attended PET program in Fort Erie.

Over the past fiscal year Fort Erie participants have participated in all five PET core components. The program continues to offer a self directed cooking program. Participants plan menus, shop, budget, cook and clean while adhering to safety guidelines. The Fort Erie group also attended the YMCA of Fort Erie ½ day each week, where the focus was on total physical health including: weight training and cardiovascular activity such as walking, biking and swimming. The group also engaged in activities such as basketball and other team sports both indoor and outdoor. The group attended community outings and events, life skill training and music therapy.

Brain Injury Community Re-entry's PET program continues to work along side the Ontario March of Dimes providing services to individuals with acquired brain injuries in addition to developmental and physical disabilities. In the past year the PET program has moved to central St. Catharines with the Ontario March of Dimes Employment Services Department. As expected this posed a challenge to some participants who became accustomed to the previous location. Currently the PET program facility is less accommodating to people with disabilities due to the lack of space. It has challenged staff to develop new ways to provide quality service to participants. However, PET has had an opportunity to take part in more St. Catharines community events and outings.

Over the past year PET began a new program initiative comparable to a club house. A planning day for this new program initiative took place on April 9th, 2008 for individuals with ABI's who are seeking challenges not currently offered at BICR Niagara. The goal of this planning day was to establish a committee of interested participants to develop a vision for a clubhouse type program. During the planning day it was decided that the group would focus on the following sub-groups:

- A) Develop a steering committee of key people to lead this new initiative
- B) Develop a group exercise/fitness program
- C) Gardening/landscaping group
- D) Resource Pooling group – Develop a newsletter written by individuals with ABI's focusing on successes and strengths of the group members.

A steering committee was developed and met bi-weekly for seven months. The group's focus ranged from managing meetings to program details. After much planning and group meetings the group disbanded after being notified that the space originally offered to the group was unavailable at the new Stokes building. After disbanding the Club House Group it was decided that the PET program would begin a series of independent living skills groups. These groups were developed for an ABI population that is in transition and becoming

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PERSONAL EFFECTIVENESS TRAINING ANNUAL REPORT
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more independent, therefore requiring more life skills and confidence in their abilities. PET ran its first Independent Living Skills group during an 8 week time period. The group focused on shopping, cooking skills, health and nutrition and kitchen safety. This was a highly successful program and may be offered again in the future.

GILLIAN RODGER
PET COORDINATOR

BRAIN INJURY COMMUNITY RE-ENTRY (NIAGARA) INC.
RECREATION SERVICES ANNUAL REPORT
2008-2009

GENERAL OVERVIEW

Brain Injury Community Re-entry (Niagara) Inc. (BICR) takes pride in offering a variety of recreational services to our participants, those who are on our waitlist and many community partners throughout the Niagara Region.

ONGOING GROUPS / DROP IN EVENTS

DROP IN PROGRAMS	PARTICIPANTS SERVED (averages)
Bowling at Parkway Lanes	13 per week
Men's Group	9 per week
Fun in the Sun (June – August 2008)	12 per week

REGISTRATION PROGRAMS	PARTICIPANTS SERVED (averages)
Whispering Pines	9 per week
WRAP Mondays	7 per week
WRAP Fridays	8 per week
Archery	6 per week

TRIPS	PARTICIPANTS SERVED (exact #'s)
Boundless Adventures Family Trip (May 2008)	6 participants, 6 family members and 2 staff
Geneva Park August 25 – 28, 2008 (Residential)	7
Geneva Park August 11 – 14, 2008 (COSS & Modular)	8
Geneva Park February 23 – 26, 2009 (Residential & COSS)	11

SEASONAL:	PARTICIPANTS SERVED (averages)
Baseball Practices	8 per week
Baseball Tournament	38 attended
Canoeing x 14 weeks	4 per week
COSS & Modular Services Christmas Party	140 including family members and staff
Valentines Dance	38

CALENDAR OUTINGS	APR	MAY	JUNE	JULY	AUG	SEPT	OCT	NOV	DEC	JAN	FEB	MAR	TOTAL
# OF EVENTS	8	9	10	8	9	9	9	9	9	9	8	9	106
# ATTENDED	71	83	97	78	85	67	78	79	73	78	89	96	974

PROGRAM HIGHLIGHTS

- All ongoing groups and activities offered by the recreation department continued to maintain maximum numbers.
- The successful coordination of two summer trips and one winter trip to Geneva Park.
- BICR continues to foster a successful partnership with the School of Horticulture for the WRAP program.
- Continued success of the Learning and Leisure Guide and Recreation Calendar as a tool for communicating recreational and group programming offered at BICR.
- The continuation of ongoing contact with residential recreation representatives, each residential site facilitating one recreation event each month.
- Continued success of seasonal recreation activities that include a Bow-la-thon and Baseball Tournament.

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- BICR's recreational services worked closely with Boundless Adventures to provide a successful family outdoor adventure trip.
- A new initiative during the past fiscal year was a Valentines Dance. This event was very successful and will continue annually.
- Van Coordinator for one agency vehicle housed at the BICR office.
- Provided day to day support to co-op students in recreational services from a variety of post secondary school in the area.

As the Recreation Coordinator I participated in the following BICR committees: Bowl-a-thon, Golf, Vacation planning, Modular Services, Transportation, Community Outreach Support Services /Modular Services Christmas Party.

DAVE HORTON
RECREATION COORDINATOR

BRAIN INJURY COMMUNITY RE-ENTRY (NIAGARA) INC.
VOCATIONAL SERVICES ANNUAL REPORT
2008-2009

GENERAL OVERVIEW

The Vocational Department consists of one Coordinator and one full time Case Facilitator. The staff assists participants with obtaining and maintaining part-time or full-time employment, find meaningful volunteer experiences, assist with return to school programs and administers employment assessments.

HIGHLIGHTS FROM 2008-2009

- A four year partnership continues to grow with a small business called Cemetery Gardening Angels. The business provides gardening care to cemetery plots at six cemeteries in the Niagara Region. Cemetery Gardening Angels have hired a total of six individuals at a competitive wage to work at Victoria Lawn Cemetery two days per week and the Fonthill and Welland cemeteries 3 days per week. The surrounding cemeteries are being cared for by one participant and a staff person who use two days per week to go from one cemetery to the next to weed, deadhead and water the plots. There have been numerous hours dedicated to organizing schedules, transportation and staffing to make this endeavour successful.
- The Vocational Department was contacted by a small business owner from Niagara Falls to assist with the Revitalization of Queen Street Program. The request consist of building large planter boxes, plants being purchased and planter boxes being installed for over 20 businesses located on Queen Street in Niagara Falls. The planter boxes will be maintained throughout the summer months by two participants and a staff person. A proposal is being submitted with the intention of developing year round employment opportunities and a continuing partnership with the Revitalization Committee.
- In early summer the Vocational Department office along with the Ontario March of Dimes Employment Services moved locations to 243 Church Street in St Catharines. The location is centralized making it more accessible for our participants.

STATISTICS

During the past year the number of active participants has fluctuated between 23 – 28. The waitlist ranged from 1-6 participants.

The following statistical information provides an overview of the positions held by our participants during the fiscal year:

- Competitively Employed – 10 -12
- Seasonal Employment - 6
- Volunteering Independently - 8-11
- Job Searching - 6 -8

CHALLENGES

- Transportation for the participants to and from employment or volunteer positions continues to be the biggest obstacle.
- The Volunteer Ventures program has not been able to continue due to low numbers. However a group of participants continue to assist with Adopt-A-Road twice a year.
- Educating employers about the effects of an acquired brain injury and the compensatory strategies needed to have a successful placement.

BRAIN INJURY COMMUNITY RE-ENTRY (NIAGARA) INC.
VOCATIONAL SERVICES ANNUAL REPORT
2008-2009

- The economic recession has made it a very difficult year in securing competitive employment for our participants. There are minimal jobs available and our participants are competing against an unusually larger number of people for entry level jobs, making it very difficult to secure employment.

In summary, the 2008-2009 fiscal year has brought many successes and changes in the Vocational Services Department. The staff are looking forward to another successful year.

TINA HORTON
VOCATIONAL COORDINATOR

BRAIN INJURY COMMUNITY RE-ENTRY (NIAGARA) INC.
INTAKE DEPARTMENT ANNUAL REPORT
2008-2009

GENERAL OVERVIEW

The Intake Coordinator is responsible for supporting applicants and families with the application process by responding to all referrals and requests for information. Core functions of the position include determining eligibility status, obtaining informed consent, identifying service needs, assisting individuals in completing the application form, providing access to information about community resources, facilitating the coordination of services, acting as a gatekeeper to more intensive supports, maintaining waitlists, advocating for applicants, educating the applicant, families and service providers around service options that are available.

HIGHLIGHTS

During the reported year from April 1, 2008 to March 31, 2009, there were a total of 203 calls that were recorded. Providing information on BICR programs and services and responding to referrals for service were the two primary reasons for the calls. There were many follow up telephone conversations and meetings that resulted from the original call that had been recorded.

FISCAL YEAR	TOTAL RECORDED CALLS	INDIVIDUALS ADMITTED TO BICR SERVICES	FILE CLOSURES AT INTAKE LEVEL	REFERRALS THAT ARE PENDING ELIGIBILITY STATUS (AS OF MARCH 31, 2008)	INDIVIDUALS ON WAITLIST (NOT RECEIVING ANY COMPONENT OF SERVICES) AS OF MARCH 31, 2008
April 2007 – March 2008	215	63	39	13	18
April 2008 – March 2009	203	54	31	9	14

Thirty one (31) applicant files at the intake level were closed. Reasons for this included the fact that the applicant was better served at another agency, the service was no longer needed, or the applicant moved out of the area.

ACTIVITIES AND ACCOMPLISHMENTS

Intake Coordinator continued to oversee the waitlist and facilitated **54 admissions** for applicants to Case Coordination, Modular Services, and Comprehensive Services when vacancies became available. These stats do not include Fee for Service files where intakes were completed and files forwarded to the Manager for Fee for Service.

FISCAL YEAR	CM	BUCKLEY TOWERS / PARKDALE	COSS	SW	PSYCH	VOC	REC	PET
April 2007 – March 2008	42	2	6	3	6	1	1	2
April 2008 – March 2009	39	0	4	1	6	4	0	0

In addition to the admissions, there continued to be a number of internal transfers that took place but were facilitated by other staff. Of particular interest is that there were **three individuals within this fiscal year who were transitioned from a LTCF into BICR programs (two individuals moved into the Residential program and one individual moved into the Supported Independent Living program).**

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INTAKE DEPARTMENT ANNUAL REPORT
2008-2009

The Intake Coordinator continued to facilitate sessions for staff training and development. A total of eight education sessions were facilitated in the area of Brain Basics and Crisis Intervention and Management Training.

The Intake Coordinator also facilitated a total of seven recreational sessions at Whispering Pines and WRAP groups as coverage for the Recreation Coordinator.

The Intake Coordinator has been involved in a number of internal committees during this fiscal year. This has included the Participant Safety Steering Committee, Ethics Committee, Admissions Committee, Participant to Participant Violence committee, ABI Services, and CIM committee.

An information session on programs and services offered by BICR was held at Niagara Rehab on October 8, 2009 and facilitated by the Intake Coordinator.

CHALLENGES AND TRENDS

A challenge in this fiscal year has been responding to intake statistics as required by the Local Health Integrated Network. An excel spreadsheet has been set-up to capture the applicants that are admitted into service and to record the time lag between admission and the date services are offered. Stats are being collected around the number of inappropriate referrals to BICR and the time lag between redirecting those referrals to another service provider. The Intake Coordinator has facilitated referrals to CCAC, Niagara Rehab, OMOD, Seniors Community Programs, Contact Niagara, Public Health Department Community Mental Health Program, NADAS, MS Society, Gateway Community Services, CMHA, and BIS services for applicants who were moving into the Hamilton region.

During this fiscal year, the Intake / Admissions Coordinators from various agencies within OACBABIS have been involved in teleconference calls discussing admissions, transitions, and discharge planning issues. The group had the opportunity to meet at CHIRS (Community Head Injury Resource Services) on February 25, 2009 to specifically discuss needs assessment tools, organizing / prioritizing waitlists, and the idea of a centralized waitlist to manage residential and supported independent living placements. There were many excellent points brought forward with respect to the concept of a centralized waitlist and these were brought forward to the OACBABIS Directors Network. It is anticipated that these teleconferencing calls will continue with agencies involved in the OACBABIS group.

In relation to demographic characteristics in Niagara, most individuals receiving service are residing in St. Catharines / Thorold (43%) followed by about 23% living in Welland, and about 21% residing in Niagara Falls. The remaining 13% are living in other communities within the Niagara Region.

There has been an identified gap for individuals who experience cognitive challenges following a traumatic event but where the diagnosis is an early onset of dementia. BICR continues to partner with existing community services to complete appropriate referrals however services for individuals with an early onset of dementia is very limited.

BRAIN INJURY COMMUNITY RE-ENTRY (NIAGARA) INC.
INTAKE DEPARTMENT ANNUAL REPORT
2008-2009

The breakdown of the age characteristic is based on the percentage of individuals currently receiving service within BICR. These stats do not include individuals who are involved with Case Management who do not have an active file with BICR.

AGE	PERCENTAGE OF INDIVIDUALS
16-19	1%
20-29	9%
30-39	15%
40-49	36%
50-59	28%
60-64	7%
65 +	4%

In summary, the 2008-2009 fiscal year has been a busy year and continues to provide a service to a number of individuals and their families living with the effects of an acquired brain injury.

MARGO VAN HONSBERGER
INTAKE COORDINATOR

BRAIN INJURY COMMUNITY RE-ENTRY (NIAGARA) INC.
PSYCHOLOGY SERVICES ANNUAL REPORT
2008-2009

GENERAL OVERVIEW

Psychology Services has one full-time Psychologist, who also serves as BICR's Clinical Director. The Psychologist reports to the Executive Director, and provides clinical supervision for the Clinical Social Worker. Administrative Services supports the Psychologist with about ten hours per week of secretarial time. The types of clinical services provided by Psychology include assessment (e.g., psychological, neuropsychological, and behavioural), intervention (e.g., individual, couples, and family), consultation (to BICR and other staff), on-call and crisis management support, and supervision. The Psychologist is also available to complete reports and forms that help Participants access resources. These all represent clinical services provided to specific Participants, and total over 80 percent of the Psychologist's weekly hours. The remainder of the Psychologist's activities include administrative duties such as committee work, research, and participation in the Management Team's planning days.

HIGHLIGHTS

During the 2007-2008 year, psychological services were provided to over 80 different Participants, and generated over \$10,000 in revenue. There were 38 new referrals, and 28 discharges. The average time that Participants waited before beginning service this year was 8.4 weeks, an eight percent decrease. For Participants who completed service this year, the average case was active for about 20 weeks. The main recipients of psychological services continue to be Ministry of Health-funded Participants in Residential, Outreach, Case Management, and Modular Services.

ACTIVITIES AND ACCOMPLISHMENTS

The Psychologist remains involved in several BICR committees and task groups. These include the Management Team during their planning days, Behavioral Review Committee, and Admissions Committee. The Clinical Quality Assurance program has been running for almost four years and shows good achievement of clinical goals by Participants. These data also indicate that after admission of a Participant to BICR services their engagement in meaningful activity increases by over 35 percent, and their quality of life increases by about 25 percent.

Educational activity has included supervising a full-time Psychology student from Germany's University of Heidelberg who volunteered at BICR for several months. The Psychologist also serves as Adjunct Professor for the Master's program in Applied Disabilities Studies at Brock University, and will be teaching McMaster University medical students who are part of the newly opening Niagara campus. The Psychologist has also become certified by the Biofeedback Certification Institute of America.

CHALLENGES AND TRENDS

Complexity of many cases due to neuropsychiatric impairment, substance abuse, criminal behavior, and chronic pain requires continuing creativity. BICR has been able to develop very good collaborative relationships with local physicians and allied health professionals, housing and financial support offices, a substance abuse treatment office, and law enforcement officials. BICR is very fortunate to have a number of excellent community partners around Niagara, and in Hamilton and Toronto. The Managers and Staff are genuinely enthusiastic and inspiring to work with, and this benefits the families and participants enormously.

JOHN DAVIS, PH.D., C.PSYCH., ABPP
PSYCHOLOGIST AND CLINICAL DIRECTOR

SOCIAL WORKER ANNUAL REPORT

2008-2009

GENERAL OVERVIEW

This past year has been busy and a number of changes have occurred in Social Work Services. In November 2008, I returned from a year maternity leave. Currently, the Social Work program provides individual, couples, and family counselling both at the main office and offsite at various locations. Along with these services, the Social Worker is available to present to groups (both staff and participants) on various topics, and has done so in the past. The Social Worker also delivers clinical consultation on both a formal and informal basis to staff who are working with participants and their families. Finally, the Social Worker sits on the Admissions Committee.

This year the Social Worker participated in an Errors of Omission Task Group which looked at participant to participant violence. This was a valuable learning experience and a great opportunity to work in a group setting.

Over the past year there has been 23 new referrals for social work services, which is approximately two per month. The wait list has remained between 7-10 per month, with most participants receiving contact within 4-6 weeks.

This spring the Social Worker along with a Case Facilitator were pleased to offer a "Substance Dependence Support Group" which began in April of this year. The group runs for 10 weeks, meeting on Thursdays, at the main office, from 2-4pm. The course content consists of mainly the SUBI workbook, with additional information from various other sources. There is no fee for the participants to attend and they were given a binder/workbook to complete and keep. This is a pilot project which may evolve into an ongoing group depending on the outcome and needs of the participants.

Goals for the fall include the provision of information sessions to family members on topics of interest to them. This would be an opportunity to develop relationships with families and to build familiarity and trust.

Recently the Social Worker attended the 16th Annual Conference on Neurobehavioural Rehabilitation in Acquired Brain Injury, which proved to be both enjoyable and informative. Continued education is an excellent way to increase my knowledge base and build on my existing skills.

In summary, it is great to be back and I look forward to a busy, exciting year in my role as full time clinical social worker.

KIMBERLEY UNDERHILL
SOCIAL WORKER

BRAIN INJURY COMMUNITY RE-ENTRY (NIAGARA) INC.
20TH ANNUAL GENERAL MEETING MINUTES
JUNE 11TH, 2008

Present: Nick Ostryhon, Brenda Yeandle, John TeBrake, Frank Greco, Maggie Smith, Jacqui Graham,
Dr. Linda Cudmore and Steve Murphy

Regrets: Luc Savoie and David Shapiro

1. Meeting called to order at 5:15 p.m.

2. Adoption of the Agenda

Motion: To adopt the agenda for the 20th Annual General Meeting, as presented.

Moved: Jacqui Graham

Seconded: Steve Murphy

Carried.

3. Review and approval of the minutes from the Annual General Meeting held on June 13th, 2007

Motion: To approve the minutes of the 19th Annual General Meeting held on June 13th, 2007.

Moved: Jacqui Graham

Seconded: Steve Murphy

Carried.

4. Financial Report & Investment Review

Larry Iggulden presented the financial report. Larry provided a review of the agency's audit report conducted by Partridge Iggulden Chartered Accountants and included the balance sheet, the statement of revenues and expenses, donations and fundraising as well as the statement on cash flow.

Nick Ostryhon made a motion to accept the annual financial report as presented.

Motion: To approve the Annual Financial Report ending March 31st, 2008, as presented.

Moved: Steve Murphy

Seconded: John TeBrake

Carried.

5. Other Business:

1. Presidents Report read by Nick Ostryhon

2. Executive Director Report read by Frank Greco

3. Appointment of Auditors

Motion: To appoint the accounting firm of Partridge Iggulden for the operating year of 2008-2009.

Moved: Steve Murphy

Seconded: John TeBrake

Carried.

BRAIN INJURY COMMUNITY RE-ENTRY (NIAGARA) INC.
20TH ANNUAL GENERAL MEETING MINUTES
JUNE 11TH, 2008

1. Recognition of 2007-2008 Officers

Nick Ostryhon – President
Lynne Rousseau – Secretary
Steve Murphy – Director
Maggie Smith – Director
Luc Savoie – Director

Brenda Yeandle – Vice-President
John TeBrake – Treasurer
David Shapiro – Director
Jacqui Graham – Director
Dr. Linda Cudmore – Director

2. Affirmation of the following Directors and Officers for their continued term

Nick Ostryhon – President
John TeBrake – Treasurer
David Shapiro – Director
Luc Savoie – Director

Brenda Yeandle – Vice-President
Steve Murphy – Director
Jacqui Graham – Director
Dr. Linda Cudmore – Director

6. The date of the next Annual General Meeting will be announced at a later time.

7. Adjournment

Motion: To adjourn the 20th Annual General Meeting.
Moved: Jacqui Graham
Seconded: Maggie Smith
Carried.



PARTRIDGE IGGULDEN LLP
CHARTERED ACCOUNTANTS

WALLACE PARTRIDGE, C.A.
LAWRENCE IGGULDEN, HONS. B.A., C.A.
ALAN SIMPSON, B.B.A., C.A.
ELISEO SINOPOLI, HONS. B. ADMIN., C.A.

AUDITORS' REPORT

To the Directors of
Brain Injury Community Re-Entry (Niagara) Inc.

We have audited the statement of financial position of Brain Injury Community Re-Entry (Niagara) Inc. as at March 31, 2009 and the statements of revenue and expenses, accumulated surplus and cash flows for the year then ended. These financial statements are the responsibility of the organization's management. Our responsibility is to express an opinion on these financial statements based on our audit.

Except as explained in the following paragraphs, we conducted our audit in accordance with Canadian generally accepted auditing standards. Those standards require that we plan and perform an audit to obtain reasonable assurance whether the financial statements are free of material misstatement. An audit includes examining, on a test basis, evidence supporting the amounts and disclosures in the financial statements. An audit also includes assessing the accounting principles used and significant estimates made by management, as well as evaluating the overall financial statement presentation.

In common with many non-profit organizations, the completeness of donation revenues is not susceptible to complete audit verification. Accordingly, our verification of the receipts from these sources was limited to a comparison of bank deposits with the amounts recorded in the records of the organization and we were not able to determine whether any adjustments might be necessary to revenues, operating surplus and net assets.

Note 2 describes the fixed assets and amortization accounting policies of Brain Injury Community Re-Entry (Niagara) Inc. Land, buildings and vehicles are recorded as assets on the balance sheet with amortization recorded on buildings to the extent of principal repaid on the mortgage during the year while vehicles are amortized based on their useful life. The organization follows the generally accepted accounting principles that are required by the Ministry of Health which allows for the expensing of equipment purchases which are eligible for subsidy. Certain other fixed assets including furniture and equipment which are not subsidized are charged directly to the Reserve Fund. Canadian generally accepted accounting principles require that fixed assets should be capitalized and amortized over their estimated useful lives. Furthermore, the policy should be applied on a retroactive basis. The effects of not following Canadian generally accepted accounting principles could not be reasonably determined and as a result we are unable to determine the effect on expenditure, excess of revenue over expenditure, and net assets.

In our opinion, except for the effect of adjustments, if any, which we might have determined to be necessary had we been able to satisfy ourselves concerning the completeness of revenue referred to above and, except for the effects of the departure from Canadian generally accepted accounting principles in recording fixed assets and amortization, these financial statements present fairly, in all material respects, the financial position of Brain Injury Community Re-Entry (Niagara) Inc. as at March 31, 2009 and the results of its operations and its cash flows for the year then ended in accordance with generally accepted accounting principles as required by the Ministry of Health.

St. Catharines, Ontario
May 25, 2009

Partridge Iggulden LLP
PARTRIDGE IGGULDEN LLP
Chartered Accountants
Licensed Public Accountants

BRAIN INJURY COMMUNITY RE-ENTRY (NIAGARA) INC.**STATEMENT OF FINANCIAL POSITION****MARCH 31, 2009**

	<u>2009</u>	<u>2008</u>
<u>ASSETS</u>		
CURRENT ASSETS		
Cash	\$ 141,870	\$ 141,490
Cash - Funds held for residents	25,852	26,901
Accounts receivable (Note 4)	130,481	128,939
Prepaid expenses	<u>19,913</u>	<u>15,021</u>
	<u>318,116</u>	<u>312,351</u>
RESTRICTED CASH		
Richardson Court Facility Reserve (Note 5)	38,009	33,149
Reserve Fund (Note 6)	<u>830,479</u>	<u>782,277</u>
	<u>868,488</u>	<u>815,426</u>
FIXED ASSETS (Note 7)		
	<u>450,586</u>	<u>446,676</u>
	<u>\$ 1,637,190</u>	<u>\$ 1,574,453</u>
<u>LIABILITIES</u>		
CURRENT LIABILITIES		
Accounts payable and accrued charges (Note 9)	\$ 327,263	\$ 321,286
Liability for resident funds	25,852	26,901
Current portion of long-term debt (Note 10)	<u>16,512</u>	<u>15,558</u>
	<u>369,627</u>	<u>363,745</u>
LONG-TERM DEBT (Note 10)		
	323,098	339,610
COMMITMENTS AND SUBSEQUENT EVENT (Note 11)		
	<u>692,725</u>	<u>703,355</u>
<u>NET ASSETS</u>		
UNRESTRICTED - ACCUMULATED SURPLUS		
	-	-
EXTERNALLY RESTRICTED - RICHARDSON COURT FACILITY RESERVE (Note 5)		
	38,009	33,149
INTERNALLY RESTRICTED - RESERVE FUND (Note 6)		
	<u>906,456</u>	<u>837,949</u>
	<u>944,465</u>	<u>871,098</u>
	<u>\$ 1,637,190</u>	<u>\$ 1,574,453</u>

Approved on behalf of the Board:


 _____, Director


 _____, Director

St. Catharines, Ontario

May 25, 2009

BRAIN INJURY COMMUNITY RE-ENTRY (NIAGARA) INC.**STATEMENT OF REVENUE AND EXPENSES****YEAR ENDED MARCH 31, 2009**

	<u>2009</u>		<u>2008</u>	
REVENUE				
Ministry of Health	\$ 4,402,772	86.0 %	\$ 4,305,889	85.6 %
Ministry of Health - Richardson Court Facility	68,534	1.3	71,237	1.4
Ministry of Health - Funding flow through	12,500	0.2	-	-
Fee for service	615,737	12.0	620,053	12.3
Rental income	16,812	0.3	16,054	0.3
S.E.E.D. grants	8,190	0.2	17,900	0.4
	<u>5,124,545</u>	<u>100.0</u>	<u>5,031,133</u>	<u>100.0</u>
EXPENSES				
Building and grounds				
Amortization	15,558	0.4	15,010	0.5
Occupancy costs	175,072	3.4	162,751	3.2
Interest on long-term debt	21,561	0.4	22,524	0.4
Building maintenance and utilities	107,329	2.1	101,359	2.0
Employee benefits	494,555	9.7	490,270	9.7
Equipment	40,868	0.8	21,569	0.4
Office expenses and food	139,971	2.7	105,236	2.1
Purchased services	42,699	0.8	41,062	0.8
Sundry				
Travel	145,428	2.8	153,112	3.0
Insurance	35,307	0.7	36,497	0.7
Professional fees	18,846	0.4	16,488	0.3
Other general expenses	106,911	2.1	99,585	2.0
Transfer to reserve fund	5,527	0.1	9,270	0.2
Wages	3,813,464	74.4	3,753,223	74.6
	<u>5,163,096</u>	<u>100.8</u>	<u>5,027,956</u>	<u>99.9</u>
Expense recoveries	(106,871)	(2.1)	(94,583)	(1.8)
	<u>5,056,225</u>	<u>98.7</u>	<u>4,933,373</u>	<u>98.1</u>
OPERATING SURPLUS	68,320	1.3	97,760	1.9
MINISTRY OF HEALTH FUNDING REPAYMENT	<u>(20,001)</u>	<u>(0.3)</u>	<u>(10,024)</u>	<u>(0.2)</u>
NET OPERATING SURPLUS	<u>\$ 48,319</u>	<u>1.0 %</u>	<u>\$ 87,736</u>	<u>1.7 %</u>

BRAIN INJURY COMMUNITY RE-ENTRY (NIAGARA) INC.

DONATIONS AND SPONSORSHIP

2008-2009

Antipastos di Roma
Appex Driving Academy
Automotive Warehouse
Beatties Basics
Beechwood Golf Course
Beef Baron Restaurant
Beer Store
Best Way Bedding Ontario Inc.
Blue Star Restaurant
Bob Robinson & Son Construction
Boston Pizza
Brian Cullen Motors Ltd.
Brown, James, Tizzard Travel Services
Bulk Barn, Niagara Falls
Burkholder's Automotive Sales & Service
Canadian Linen & Uniform Service
Canadian Tire
Canal City Savings & Credit Union
Carpaccio Restaurant & Wine Bar
Cheers Restaurant
CIBC Imperial Services, St. Catharines
Club Richelieu Welland Nevada
Creative Imports
Cytec Canada Inc.
Dairy Queen, Niagara Falls
David I. Shapiro Barristers & Solicitors
Durward Jones Barkwell & Company LLP
First Niagara Insurance
Flowers Niagara
Frank's Feather and Fin Limited
Giant Tiger, Niagara Falls
Golf Town
Great West Life Assurance Company
Grenville Inspection Services Inc.
Guy Rizzo
Highland Trail Lodge
Investors Group, Anthony Leo
Investors Group, Luc Savoie
Jiffy Lube, Welland
Keith's Restaurant

KEW Steel Fabricators Ltd.
KFC, Niagara Falls
Lancaster Brooks & Welch LLP
Lewis and Krall Home Health
Lori's Hair Design
Majestic Wines
Mama Mia's Italian Eatery
Marlin Travel
Marr's Thorold Foodland
Micro Tech Niagara Inc.
Molson's
Mountainview Properties
Niagara College
Niagara Hospitality Hotels
Niagara Motors
Niagara Parks Commission
Niagara Plumbing Supply
No Frills
Papa Nick's Bakery & Cafeteria
Partridge Iggulden LLP
Pet Value, Welland
Pirie Appliances Ltd.
Professional Hockey Players Association
Richochet Water
Royal LePage
Rum Jungle
Scooters Bar & Grill
Shoppers Drug Mart, St. Catharines
Shawn Lockhart
Sobey's
Sitel
Star Collision
Steed & Evans
SVAT Electronics
The Lion Tavern
Tim Hortons
Toronto Maple Leafs Hockey Club
TD/Canada Trust
TRG Insurance, Guy Rizzo
TST Safety Training

Value Dollar, Niagara Falls
Van Houtte Coffee
Vita Health, Niagara Falls
Yellow Stitch
World Kitchens
Xerox

DONATIONS RECEIVED IN MEMORY OF:

Laurie Brown (Carpenter)
Jim Wiley Grant
Cecile Hagadorn
Carl Huffman
Tony Kuklis
Mary Rhora
Karl Stunt

We would also like to recognize the many individuals who have contributed to our agency during the 2008-2009 fiscal year. A special thank you to all!